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ABSTRACT

One of nine competency-based training modules for personnel preparation in early childhood special education, this guide focuses on behavior management and development of self control. All modules are adaptable for use with a general audience, direct service personnel, or administrators and are based on the following principles: developmentally appropriate practice; integration of children with disabilities with typically developing peers; collaborative relationships with families; attention to individual needs; and provision for and valuing of diversity among young children and their families. Modules are intended to be used in whole or in part, in groups or for self-instruction. Each module comprises goals; competencies (knowledge, skill, and values and attitudes); and objectives, with a matrix for each objective identifying enabling activities, resources, and leader notes. Relevant handouts, forms, and readings are provided for each objective. This module offers activities to increase understanding of the following factors of behavior management: the environmentally sound preschool; developmentally appropriate behavior; the least restrictive setting; and collaboration with families. The module stresses preventive approaches to foster the development of self control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children, as well as knowledge of when and how to seek additional help. (Contains 30 references.) (DB)

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Modules for Competency-Based Personnel Preparation in Early Childhood Education

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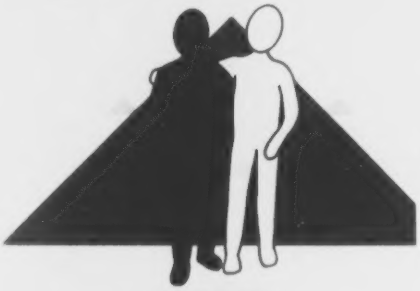

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PROJECT PREPARE

Competency-Based Personnel Preparation in Early Childhood Education Modules

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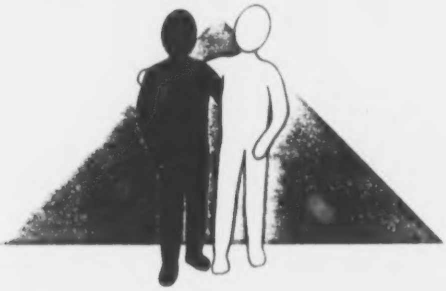

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Dear Educators:

There is, perhaps, no more important issue to address in the field of early childhood education than the professional development of those individuals who work in this field. The results of numerous studies that have been conducted to assess the quality of programs currently available to our nation's young children and their families suggest that the training and quality of staff are critical determinants to quality programming.

In the area of early childhood special education, professional training needs are also recognized as paramount. The number of preschool programs for children with disabilities has grown rapidly in Ohio, thus creating a dramatic increase in the number of trained professionals needed to meet the resulting human resource demands. The training needs of this cadre of teachers, as well as other service personnel who face this challenge, is the focus of *Project Prepare.*

This series of nine competency-based training modules is the result of a commitment on the part of many individuals in the State of Ohio to quality services for young children. Their dedicated efforts are to be commended. *Project Prepare* reflects widely accepted principles of sound early childhood theory and practice; reflecting what we know about the development of all young children, and what we know about the development of young children who have special needs. We hope that these materials assist you in your efforts to provide quality early childhood education programs for all of Ohio's young children.

Sincerely,

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The modules in this set were developed as a result of a commitment on the part of many professionals in the State of Ohio; a commitment to quality services for young children with special needs as well as those who are typically developing. A need was established for compentency-based early childhood personnel training that reflects a commitment to: (1) the integration of children with disabilities and those who are typically developing; (2) developmentally appropriate practice; (3) providing services that value and are sensitive to all diversity in a multicultural, pluralistic society; and (4) effective collaboration between parents and professionals.

The immediate need for a large cadre of well-prepared personnel sensitive to the needs of young children with disabilities was recognized by leadership in the Ohio Department of Education. With the establishment of the Division of Early Childhood Education, a forceful position was taken on behalf of all young children. Funding was then made available to the Cuyahoga Special Education Service Center for research and development in personnel preparation.

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We wish to thank the members of the Steering Committee and the Consistency Task Force. Their feedback and endless hours of review supplied input to the process of refining the modules. The professionals on the Reaction Panel contributed insightful feedback during the early stages of module development that enhanced the content and format of the modules. The technical staff, whose dependable assistance was a critical component of our working team provided the day-to-day nitty gritty backup assistance necessary to a quality finished product. Most of all, we would like to thank each member of the Module Development Teams who conceived, delivered, nurtured, and raised the "child" whose name is Project Prepare. We offer this fully functioning child up for adoption to the Special Education Regional Resource Service Centers, without whose membership and continued abiding interest in total quality staff development, Project Prepare would not have been possible.

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PROJECT PREPARE GENERAL INTRODUCTION

This module is one of nine competency-based personnel preparation modules designed to prepare professionals to employ best practices to meet the special needs of young children with disabilities. Each module was developed by an outstanding team as part of a statewide collaborative effort called Project Prepare. Project Prepare was funded by the Ohio Department of Education, Division of Early Childhood Education in concert with the network of Special Education Regional Resource Centers.

Each module targets a facet of best practice found to be critical in implementing a free appropriate public education specifically for three- to five-year-old children with disabilities. While this is the age focus of Project Prepare the modules are applicable for serving all young children. The module topics are:

Assessment,

Family Collaboration,

Individualized Education Program (IEP),

Preschool Integration,

Managing Behavior,

Planning,

Play,

Technology,

Transition.

This list of carefully selected topics does not exhaust all aspects of knowledge, skills, attitudes, and values that are important, even essential, in meeting the challenge posed in implementing the amendments, contained in P.L. 99-457, of the Individual with Disabilities Education Act (I.D.E.A.). However, each module does represent a "competency cluster," rather than a single competency, addressing several general objectives, each of which is broken down into specific knowledge, skill, and value/attitude objectives.

The teams were asked to monitor their own work on the basis of carefully determined criteria, which were then used throughout a multi-stage process of review. Several factors were scrutinized in order to keep the content philosophically consistent within each and across all modules. These premises are in harmony with the philosophical position of the Ohio Department of Education, Division of Early Childhood Education which in turn reflects best practices in the field of Early Childhood Special Education. The issues are summarized as follows:

Developmentally Appropriate Practice in accord with principles set forth by the National Association for the Education of Young Children (NAEYC).

Integration of children with disabilities in programs with their typically developing peers.

Collaborative relationships with families.

Attention to the special needs of each child with recognition of the child's abilities, as well as disabilities.

Provision for and valuing of all diversity among young children and their families (e.g., ability, cultural, racial, religious, gender, etc.).

A second criteria the module development teams were asked to consider in monitoring their work was adaptability. Adaptability was defined in three ways. First, each module needed to be adaptable in a demographic sense, that is, responsive to needs in diverse geographic settings (rural, urban, suburban) with diverse populations. Second, each module was designed for potential use with three different groups of participants:

General (e.g., parents, community groups);

Staff (direct service personnel, such as teachers and therapists);

Administrators (persons in leadership roles, such as building principals and program directors).

Some of each module's content may be applicable to all three potential "audiences" however, in many instances differentiation of content is appropriate, based on the anticipated needs of participants. Thus, while the same goals are indicated for the three groups of participants, these goals are translated in knowledge, skills, and value/attitude objectives appropriate to each group. Differentiation of objectives by audience and by type is shown in the following matrix taken from one of the modules.

GOALS

KNOW THE LEGAL AND ETHICAL BASIS FOR PRESCHOOL INTEGRATION

	GENERAL OBJECTIVE	STAFF OBJECTIVE	ADMINISTRATOR OBJECTIVE
COMPETENCY COMPONENT	Understand the legal and ethical basis for including children with disabilities in typical preschool programs.	Understand the legal and ethical basis for including children with disabilities in typical preschool programs.	Understand the legal and ethical basis for including children with disabilities in typical preschool programs.
KNOWLEDGE	Participants will identify the relevant sections from federal law which provide the legal preference for including children with disabilities in typical programs.	Participants will identify the relevant sections from federal law which provide the legal preference for including children with disabilities in typical programs.	Participants will identify the relevant sections from federal law which provide the legal preference for including children with disabilities in typical programs and the ethical issues related to this inclusion.
SKILL	Participants will explain from an ethical perspective, why children with disabilities should participate in typical preschool programs.	Participants will list "supplemental services" which might be necessary to enhance the participation of children with disabilities in typical programs.	Participants will synthesize legal requirements and ethical considerations related to inclusion by predicting the outcome of cases for specific children.
VALUE/ATTITUDE	Participants will list potential benefits of inclusion for children, families, and teachers.	Participants will give personal opinions of potential benefits of including children with disabilities in typical programs and means to make this inclusion possible.	Participants will generalize a philosophy statement to guide a school system in the direction of inclusion.

The third form of adaptability is implied by the term module itself. Each module is intended to have an "accordion-like" quality so that, while each is a complete "package" entailing about five hours of instruction, sections can be selected, at the discretion of the group leader, depending upon: (1) needs of the participants, and (2) time availability. The module is also adaptable in the sense that it can be used for individual self-instruction as well as group instruction by a leader.

Other criteria employed in developing and refining the modules were:

- The **goals** for the module are clear to the leader and to the participants.
- Each **activity** is congruent with the objective with which it is associated.
- The module is, insofar as possible, **self-contained and self-sufficient** — that is, all needed materials are provided or readily available.
- **Terms** are appropriately used and clearly defined.
- The module is designed to hold the **interest and motivation** of those using it.

For each objective, a matrix identifies enabling activities, resources for use in conducting these activities, and leader notes (suggestions, possible supplemental materials, etc.). The following example of a matrix from one module is representative of this plan of organization and illustrates how resources and notes are linked to activities.

LEVEL: STAFF

GOAL: Comprehend the significance of play in the development of young children.

COMPETENCY TYPE: KNOWLEDGE

OBJECTIVE: Participants will understand (recognize) the relationship between play and the developing child.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
10. Discuss stages of play that children experience as viewed by several theorists. – Mildred Parten – Piaget – Sara Smilansky – Others	10. Use Handouts *Mildred Parten's Developmental Stages of Social Play* *Piaget's Theory of Play* *Sara Smilansky* *Others*	10. Read Chapter 11, *Teaching Infants and Preschoolers with Handicaps* by Bailey and Wolery. Read *Special Needs: Play and Learning*. Also read *Play As A Medium for Learning & Development. A Handbook of Theory and Practice* by Bergen.
11. Review *Four Trends Pertinent to Play.*	11. Use Transparency *Four Trends*	11. Read and study leader notes, *Four Trends Pertinent to Play.*
12. Review stages of cognitive play.	12. Use Handout *Stages of Cognitive Play*	12. Cognitive play is used here as one example. If time permits, other domains could be discussed.
13. Review the way play can contribute to the preschool child's overall development.	13. Use Transparencies *As Adults* *All people ...*	13. Read Chapter 11, *Teaching Infants and Preschoolers with Handicaps* by Bailey and Wolery. Read Section 2 in *Play As A Medium for Learning and Development* by Bergen.

Enabling Activities — This column lists the recommended activities that will lead to the accomplishments of the objectives.

Resources — The materials listed in this column are those needed to complete the recommended activities

Leader Notes — Special recommendations to the in-service leader on conducting the suggested activities are provided in this column.

MULTI-STAGE PROCESS OF DEVELOPMENT AND REVIEW

Having identified their respective topics, the teams developed their modules during the 1990-91 school year, sharing progress reports at a series of planning meetings. This stage culminated in more formal presentations of the "work-in-progress" to members of all module development teams. Project Prepare staff, and a Reactor Panel. Comments and suggestions elicited through this process were incorporated in feedback meetings of the Reactor Panel with each team.

Throughout the 1991-92 school year, a two-stage field test procedure was implemented. First, each team presented a five-hour training session of their module at a primary training site. Evaluation data obtained from these sessions included feedback from the leaders, the participants, and also an invitational group of observers. Observers included steering committee members, members of other teams, and project coordinating staff. Participants in each primary training session were given the opportunity to participate in secondary training, that is, to conduct a five-hour training session using any of the nine modules, providing similar evaluation data. A total of 18 secondary training sessions were held. The results of the primary and secondary training yielded data used in considering modifications.

Overall, both participants and leaders who supplied feedback on the field test sessions were very positive about the training and materials. A total of 484 surveys were completed by in-service participants. Those who responded represented individuals from diversely populated areas: rural (37%), urban (16%), urban and suburban (14%), rural, urban and suburban (14%), suburban (8%), and rural and urban (7%). Almost all (98%) felt that the activities presented at their sessions related to the in-service topic. A similar response was found for consistency with philosophical premises. Most believed that the in-service training was consistent with developmentally appropriate practice (98%), exceptionality appropriate practice (90%), integration (91%), and family and professional collaboration (93%). The majority of those who did not respond positively to these items on consistancy "did not know" whether or not there was consistency.

The greatest amount of disagreement was found on the item which asked whether the training was sensitive to multicultural issues. Seventy two percent of those responding indicated "yes," while 16% said "no" and 16% "did not know." As a result of this feedback the issue of sensitivity to diversity was strengthened in the materials during the final revision.

Additional positive feedback from participants showed that 93% felt that activities were appropriate for the audience, 96% believed the interest level was acceptable or terrific and 95% would recommend the training to others. No significant differences were found among responses from different types of audience participants (i.e., teachers, psychologists, parents, etc.) or among groups from varied populations (i.e., urban, rural, suburban, etc.).

The feedback provided by the 21 in-service leaders who completed response surveys was quite similar to that shared by the participants. Most (91%) felt that the materials allowed them to meet their objectives and that activities related to the goals stated in the modules. Almost all believed that the materials were consistent with developmentally appropriate practice (95%), exceptionality appropriate practice (95%), integration (94%), and family and professional collaboration (95%). Sixty three percent of the leaders responding believed that the materials were also sensitive to multicultural issues, while 31% "did not know," and 5% felt that they did not adequately address this premise. As stated above, this information was used to identify and make needed revisions.

In addition, most leaders (88%) found the activities to be appropriate for all audience participants and that materials were designed to accommodate various audiences (91%). All (100%) found the interest level to be acceptable or terrific. Seventy five percent of the leaders noted that all required materials were provided and 95% believed that module materials could be used for in-service training sessions that varied in length (i.e., amount of time).

In regard to the use of the modules by leaders, most found them easy to use (95%), well organized (84%), to have clear directions (94%), and to have clear (100%), and complete (89%) leader notes. Minor revisions were made following the field test to increase these charateristics in the set.

Strong support by the leaders for the competency-based modules was found in the fact that all (100%) reported that they would use the same module again and many (89%) said that they would use other modules in the set. Finally, all leaders (100%) indicated that they would recommend the modules to other professionals who conduct in-service training.

Each module development team having made every effort to insure that their product satisfied each of the basic criteria, then used the feedback to refine and modify their final product. During the entire process each module was subjected to conscientious and detailed peer review. Directives ranged from minor editorial changes to significant and substantive additions, deletions, and reworkings. Team cooperation and genuine enthusiasm was evident throughout the entire process, as was their creativity, resourcefulness, thoroughness, and skill. Their efforts combined with the expertise and conscientious work of the Project's Steering Committee, cross-module review teams, the Reactor Panel, internal and external expert reviewers, and the Project Consistency/Finalization Task Force made for a truly collaborative project and a total quality product.

PROJECT PREPARE

Module Introduction

Managing Behaviors
Focus: Self-Control

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ABSTRACT

This module is designed to provide users with fundamental information to support and discuss knowledge, skills, and attitude/value considerations necessary for all preschoolers, including those with disabilities, to learn to manage their own behaviors in their individual early childhood environment. It recognizes the important concept that professionals must establish the opportunities for success through purposeful planning and implementation of sound theory and practice. The activities are planned to familiarize personnel with the factors to be considered. These include the environment for learning whether it is the kitchen table, an integrated preschool, or a separate class. An environmentally sound preschool fosters appropriate child development. Knowledge of developmental appropriateness for both typically developing children and children with disbilities, the least restrictive setting, and collaboration with families and other caregivers is important. As a program is developed, it is imperative to gain knowledge about those preventative approaches to child-management that foster the development of self-control in the child. It is also necessary to recognize when additional resources are needed to assist a child in this goal. Developing a philosophy of developmentally appropriate practice in the design and implementation of the preschool program is necessary before children are enrolled. Resources, materials, and bibliography provide the information to implement the training. Varied activities are included.

PHILOSOPHY
Managing Behaviors - Focus: Self-Control

Children need the opportunity to develop self-control from the onset of their formal educational experience. In order for self-control to develop, educators must gain an understanding of the developmental levels of typically developing children and become aware of what age appropriate means in terms of expectations. An important consideration in managing behaviors is the child's cultural learning environment. Recognizing the value of preventative approaches in the development of self-control through knowledge of varied approaches provides educators with techniques for use in all early childhood settings. The flexibility needed to integrate children with disabilities into early childhood programs for typically developing children insures an appropriate setting for all children.

Thus, Managing Behaviors - Focus: Self-Control is designed to recognize the goodness of children and their normalcy. It does not assume that there is a problem; but rather, it directs significant adults toward a preventative approach to guidance as it sets the stage for success — not only in the early childhood setting, but as the child begins the long educational trek toward becoming ... becoming the most that the child can be.

GOALS

The goals for this module are as follows:

1. Gain competency in the concept of developmental appropriateness for the age span of the children within a group including children with disabilities and children who are typically developing as an element in developing self-control in the children.
2. Gain competency in those factors that need to be present in the preschool environment/s in order for developmentally appropriate practice leading toward success in the development of self-control in all children to occur.
3. Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social compentence, self-esteem, systematic interventions, and communication skills in all children.
4. Gain competency in knowing when and how to seek additional resources for managing behaviors that are beyond the scope of the school setting for individual child needs.
5. Develop understanding of a philosophy that provides for the development of self-control that can be used to conceptualize a developmentally appropriate environment and behavior plan for either center-based or itinerant preschool learning for all children, those who are typically developing and those children with disabilities.

GOAL #1 Gain competency in the concept of developmental appropriateness as an element in the development of self control.

AUDIENCES

	GENERAL	STAFF	ADMINISTRATOR
Competency Component	Recognize developmental appropriateness for preschoolers with disabilities and those who are typically developing.	Define practical applications of developmentally appropriate practices for preschoolers with disabilities and those who are typically developing.	Define developmental appropriateness for preschoolers with disabilities and those who are typically developing in terms of program development and support.
Knowledge Objectives	Participants will understand the importance of developmental appropriateness in all areas of a child's development: physical, emotional, social, and cognitive.	Participants will know developmental appropriateness for children ages 1-5 in order to implement appropriate practices for preschoolers.	Participants will know developmental milestones and how they impact on program delivery in various settings: home-based, integrated preschool, and separate classrooms.
Skill Objectives	Participants will define developmentally appropriate as it relates to typically developing preschoolers and children with disabilities.	Participants will select appropriate practices for preschoolers ages 3-5 based on developmental appropriateness in various settings.	Participants will select appropriate practices for preschoolers ages 3-5 based on developmental appropriateness.
Attitude Objectives	Participants will appreciate the importance of matching expectations to developmental milestones.	Participants will appreciate the need to evaluate strategies, interventions, instructional methods, and curricula based on developmentally appropriate practices.	Participants value the importance of developmental issues in setting the stage for success in a preschool setting.

GOAL #2 Gain competence in factors of the preschool environment(s) leading toward success in developing self-control.

AUDIENCES

	GENERAL	STAFF	ADMINISTRATOR
Competency Component	Describe developmentally appropriate environments that recognize the importance of facilities and materials, supportive adults, growth and development activities, and use of time and space leading toward success in developing self-control.	Describe developmentally appropriate environments that recognize the importance of facilities and materials, supportive adults, growth and development activities and use of time and space leading toward success in developing self-control.	Recognize developmentally appropriate environments that establish the importance of facilities and materials, supportive adults, growth and development activities, and use of time and space leading toward success in developing self-control.
Knowledge Objectives	Participants will define developmentally appropriate preschool environments.	Participants will be able to select appropriate environmental components and relate them to developmental needs.	Participants will define an appropriate setting for preschoolers as they differ from school-age settings.
Skill Objectives	Participants will be able to describe the components of a preschool environment that provides for children with disabilities and the needs of typically developing children.	Participants will develop plans for an environment that provides for the needs of the preschooler with disabilities and the preschooler who is typically developing especially as it relates to a child's growth in personal control.	Participants will develop a plan for equipping an itinerant teacher or special classroom to provide an appropriate setting for preschoolers with disabilities and those who are typically developing and thus foster development of self-control.
Attitude Objectives	Participants will be able to appreciate a variety of sound preschool environments that contribute to the development of self-control.	Participants will develop a philosophy of environment that provides for emerging self-control in children.	Participants will outline a short presentation that explains why certain environmental conditions are necessary for the preschool program under consideration and that will contribute to the development of self-control.

GOAL #3 Gain competence in the importance of preventative approaches to facilitating the development of self-control in young children.

AUDIENCES

	GENERAL	STAFF	ADMINISTRATOR
Competency Component	Become familiar with positive approaches to managing behaviors that aid in developing self-control in the areas of: social competence, enhanced self-esteem, systematic interventions, and communication skills.	Understand the importance of preventative approaches to managing behaviors in the areas of social competence, enhancing self-esteem, systematic interventions, and communication skills in the growth of a preschool child's self-esteem.	Understand the importance of preventative approaches to managing behaviors in the areas of social competence, enhancing self-esteem, systematic interventions, and communication skills in the growth of a preschool child's self-esteem.
Knowledge Objectives	Participants will understand the difference between preventative and reactive behavioral management approaches. Participants will define preventative approaches to managing behavior and will describe how social competence, enhanced self-esteem, systematic interventions, and communication skills are addressed by the definition.	Participants will discuss emerging self-control in the young child. Participants will describe preventative approaches to managing behaviors that are child-centered and describe how these lead to success for the preschooler.	Participants will define developmentally appropriate preventative approaches to managing behavior with preschoolers.
Skill Objectives	Participants will plan the use of each type of preventative approach. Participants will apply modifications that might be made for children with disabilities.	Participants will demonstrate techniques for each of the preventative approaches presented.	Participants will develop the skills needed to provide administrative support to preschool staff as they implement preventative approaches to managing behaviors.

GOAL #3 Gain competence in the importance of preventative approaches to facilitating the development of self-control in young children. *(continued)*

AUDIENCES

	GENERAL	STAFF	ADMINISTRATOR
Attitude Objectives	Participants will value preventative approaches to managing behavior.	Participants will describe a working philosophy that provides preschool children with the opportunity to manage their own behavior successfully.	Participants will appreciate the ethical basis for developmentally appropriate considerations for child-focused management.

GOAL #4 Gain competency in seeking resources beyond the school setting.

AUDIENCES

	GENERAL	STAFF	ADMINISTRATOR
Competency Component	Recognize the need to seek resources that may or may not be beyond the scope of the school setting to meet individual child needs.	Recognize the need and know how to seek additional resources that may or may not be beyond the scope of the school setting for individual child needs.	Recognize and support the need to seek additional resources for an individual child when needs exceed the scope of the school program.
Knowledge Objectives	Participants will know resources that may or may not be beyond the scope of the public school that could assist with some preschool children's behavioral needs.	Participants will discuss when additional resources are needed outside the public school setting for some young children with behavioral needs.	Participants will describe the resources available through the public school based on the *Rules for the Education of Preschool Children with Disabilites.* The participant will recognize potential sources of assistance.
Skill Objectives	Participants will select appropriate resources for specific situations and describe when they might be needed.	Participants will develop a resource data bank and the strategies necessary for suggesting its use to parents.	Participants will be able to provide information to staff and families about community resources.
Attitude Objectives	Participants will respect the limits of the public school personnel and their need for additional information or assistance.	Participants will value the need for additional information and assistance. Participants will evaluate the information and/or assistance and its implications for implementation.	Participants will respect the expectations and limitations of resources available to the staff in the school and in the community.

GOAL #5 Develop an understanding of a philosophy that provides for the development of self-control.

AUDIENCES

	GENERAL	STAFF	ADMINISTRATOR
Competency Component	Describe a developmentally appropriate environmental/behavioral plan for an itinerant-based or center-based preschool setting that may or may not be integrated.	Describe a developmentally appropriate environmental/behavioral plan for an itinerant-based or center-based preschool setting that may or may not be integrated.	Design a developmentally appropriate program that is based on an environmental/behavioral plan for an itinerant or center-based preschool setting that may or may not be integrated and that supports a focus on the development of self-control in young children.
Knowledge Objectives	Participants will select appropriate preschool settings that are child-focused in terms of managing behavior.	Participants will show how the behavioral component of development, the environment, and planning impact preschool success for all children.	Participants will describe the basis for decisions in implementing an appropriate preschool program that supports the development of self-control in young children.
Skill Objectives	Participants will describe the information necessary to select a preschool that is child-focused and fosters success for all children.	Participants will select topics that should be included in a presentation or brochure to describe the management philosophy for a preschool program based on best practice theory and thus supports the development of self-control in young children.	Participants will demonstrate knowledge of the various aspects of an appropriate preschool program that is environmentally and behaviorally sound.
Attitude Objectives	Participants will believe in a preschool philosophy based on developmentally appropriate practice that supports the development of self-control in young children.	Participants will describe the philosophical basis for environmental/behavioral considerations selected for inclusion in a preschool that supports the development of self-control in young children.	Participants will appreciate the variety of needs that an appropriate program must address and will accept the responsibility of supporting staff and parents as they work together to build a successful program for each child that supports the development of self-control.

GLOSSARY

Adapt: Changing or modifying the time (schedule), space, materials, or expectations of the environment to better meet the needs of an individual child or class.

Adaptive behavior: Addresses self-help, independent functioning, and personal and social responsibility as is appropriate for a same-age peer and according to one's cultural group.

Adaptive computer access: Use of an alternative input device for the computer which gives the student with disabilities an alternate means of access when the regular keyboard may not be appropriate. These include expanded keyboards, switches, touch windows, joysticks, and voice input.

Adaptive firmware card: A special card placed inside the Apple computer which allows transparent access to commercial software by any one of 16 input methods, including scanning, Morse code, expanded keyboards, and adaptive keys.

Adaptive keyboard: An alternative keyboard usually attached to the computer with an adaptive firmware card. Adaptive keyboards are generally programmable and allow the student to send information to the computer in the most efficient form based on individual needs.

Age appropriate: Experiences and/or a learning environment that support predictable growth and development in the physical, social, emotional, and cognitive domains that are typical for children at specific chronological ages.

Anecodotal records: A brief account of a situation that provides a factual description of an incident, behavior, or event.

ANSI: American National Standards Institutes: Institute which adopted a standard for the threshold of normal hearing.

Anti-bias curriculum: Developmentally appropriate materials and equipment which project an active/activist approach to challenging prejudice, sterotyping, bias, and "isms."

Appropriate environment: Surroundings that are suited to both the age and the individuality of all children present.

Appropriate practice: Techniques or a style used with young children that is age and individually appropriate.

Assertive: To maintain or defend rights without being hostile or passive.

Assessment: The collection of information through different types of procedures such as criterion-referenced tools, norm-referenced tools, observation, interviews, and anecdotal records.

Assistive device: Any specific aid, tool, or piece of equipment used to assist a student with a disability.

Associative play: A type of play in which a child plays with others in a group and subordinates his/her individual interest to the interests of the group.

At-risk: Students that have a greater chance of experiencing difficulties developmentally or at school due to social, economic, environmental, or biological factors.

Augmentative and alternative communication (AAC): An integrated group of symbols, aids, strategies, and techniques used by a student to enhance communication abilities. The system serves to supplement the student's gestural, spoken and/or written communication abilities. AAC strategies include the full range of approaches from "low tech" concrete and symbolic ones to "high tech" electronic voice out-put systems.

Battery device adaptor: Adaptation which allows a battery-operated device to be activated by a switch.

Boot: The process of turning the computer on and loading a program into memory.

Byte: The area of storage needed for storing a single character of the alphabet in memory. One thousand twenty four bytes are equivalent to one K of memory. One byte is made up of eight on/off electronic impulses called "bits." Knowing how much memory is available on your computer will ensure appropriate planning for software selection.

Categorical orientation: A philosophical approach to assessment designed to yield a diagnostic label; labeling a child according to some presumably underlying condition (e.g., learning disability, mental retardation, or behavior disorder).

Center-based services: Educational services that are provided at a central location, typically through a classroom type format.

Character: Refers to any letter, number, punctuation mark, or space used to represent information on the computer.

Child-initiated activity: An activity selected by a child with little or no intervention by another child or adult.

Close-ended materials: Materials that have one or two ways in which children can play with them and which offer few opportunities for creativity and experimentation.

Cognition: Application of intellect as opposed to feelings/affect in mental processes.

Collaboration: Interaction between people to solve a problem; working and sharing together for a common goal.

Collaborative: A group of agencies and parents working together to ensure quality services for young children with disabilities.

Communication skills: Receptive and expressive language, facial expressions, body language, gestures, etc. that allow a child to respond across settings.

Computer: It is the processing unit, memory, and power supply source of the computer system. Attached to the computer are the monitor, the input device (e.g., keyboard), and the disk drive. [Also called the central processing unit (C.P.U.).]

Computer assisted instruction (CAI): Refers to all instruction which is conducted or augmented by a computer. CAI software can target the full range of early childhood curricular goals, with formats that include simple exploration, educational games, practice, and problems solving.

Computer switch interface: Device which allows single switch access to a computer.

Constructive play: Play in which a child purposefully manipulates materials in order to build structures and produce novel or conventional creations.

Control unit: The unit that enables electrical devices to be activated by a switch.

Cooperative play: Play in which a child plays with other children in activities organized to achieve a common goal, may include interactive dramatic play or formal games.

Co-playing: Occurs when an adult joins in an ongoing play episode but lets the children control the course of the play.

Criterion-referenced tests: Evaluation tools which are specifically constructed to evaluate a person's performance level in relation to some standard.

Curriculum-based assessment: An assessment of a child's abilities or behaviors in the context of a predetermined sequence of curriculum objectives.

Cursor: The small blinking symbol on the monitor which indicates that the computer is waiting to receive information.

Dedicated device: A device containing a computer processor dedicated strictly to processing and producing voice output.

Developmental: Having to do with the typical steps or stages in growth and development before the age of 18.

Developmentally appropriate: The extent to which knowledge of child development is applied in program practices through a concrete, play oriented approach to early childhood education. It includes the concepts of age and individual appropriateness.

Developmentally appropriate curriculum: A curriculum planned to be appropriate for the age span of the children within the group and is implemented with attention to individual and differing needs, interests, and skills of the children.

Developmentally appropriate practice (DAP): Curriculum which is appropriate to the age and individual needs of children.

Differentiated referral: Procedures for planning, implementing, and evaluating interventions which are conducted prior to referral for multifactored evaluation.

Digitized speech: Speech that is produced from prerecorded speech samples. While digitized speech tends to be more intelligible and of higher quality than synthesized speech other factors such as the speaker system play into the overall effect.

Direct selection: A selection which is made on a computer through either a direct key press or use of a light to directly point to the desired key.

Discrepancy analysis: A systematic assessment process in which skills required for a task are identified and compared to a child's current skills to determine the skills that need to be taught or for which adaptations need to be made.

Disk: The item used to store computer programs. [Also known as a diskette or floppy disk.]

Disk drive: Component of computer system which reads program information stored on disk.

Documented deficit: Area of development or functioning for a child that has been determined to be delayed based on data obtained through structured interview, structured observation, norm-referenced and criterion-referenced/curriculum-based assessments.

Domain-referenced tests: Evaluation instruments which emphasize the person's performance concerning a well-defined level or body of knowledge.

Dramatic play: Play in which a child uses objects in a pretend or representational manner. [Also called symbolic play.]

Eligibility: Determination of whether a child meets the criteria to receive special education services.

Evaluation: A comprehensive term which includes screening, assessment, and monitoring activities.

Event Sampling: A type of systematic observation and recording of behaviors along with the conditions that preceded and followed them.

Expanded keyboard: Larger adapted keyboards that replace the standard keyboard for a child whose motor control does not allow an efficient use of a regular keyboard. With the use of special interfaces, the size and definition of the keys can be alterd based on the needs of the child.

Expectations: The level of behavior, skill, and participation expected within the classroom environment.

Exploratory play: Play in which a child learns about herself and her world through sensory motor awareness and involvement in action, movement, color, texture, and sound. Child explores objects and the environment to find out what they are about.

Family: Parents and their children; a group of persons connected by blood or marriage; a group of persons forming a household.

Fixed vocabulary: Vocabulary that has been pre-programmed by the manufacturer within a communication device. In some cases it can be altered. In other cases, revisions must be submitted to the manufacturer for re-programming.

Formative evaluation: The collection of evaluation data for the purpose of supporting decisions about the initial and ongoing development of a program.

Functional approach: A philosophical orientation to assessment and curriculum which seeks to define a child's proficiency in critical skills necessary for the child to be successful at home, at school, in the community, etc.

Functional play: Play in which a child repeats simple muscular movements or utterances. The repetitive action provides practice and allows for exploration.

Funding advocate: Individual who assumes critical role of developing a funding strategy, pursuing appropriate sources and patiently advocating on behalf of the child until funds are procured.

Funding strategy: A methodical play developed by the funding advocate for procuring funding which is based on a determination of unique individual needs and an understanding of the resources and requirements of appropriate systems.

Generalization: The integration of newly-acquired information and the application of it to new situations.

Graphics: Pictures and other visual information generated by the computer.

Grief: Reaction to loss; feelings parents may experience when confronted with information about their child's disability.

Hardware: Refers to all electronic and mechanical components making up the computer system, including the computer, monitor, disk drive, printer, and peripherals.

I.D.E.A.: Individuals with Disabilities Education Act.

Identification: The process of locating and identifying children who are eligible for special education services.

Imaginative play: Play in which a child uses toys or objects for imitation, role-playing, and pretending.

Incidental learning: Information learned in the course of play and other informal activities without the need for any specific teaching.

Individual appropriateness: Experiences that match each child's unique pattern of growth, personality, learning style, and family/cultural background.

Individual Family Service Plan (IFSP): A written plan for an infant or toddler developed jointly by the family and appropriate qualified personnel.

Individualized Education Program (IEP): A written education plan for a preschool or school-aged child with disabilities between the ages of three and 21 which is developed by a professional team and the child's parents.

Informal tests: Measures that are not standardized and are developed to assess children's learning in a particular area.

Initialize: A necessary process for preparing a computer disk to store information for the first time. Any information on the disk will be erased when the disk is initialized.

Input device: Any component or peripheral device which enables the child to input information to the computer. While the keyboard is the most common, other input devices include switches, adapative keyboads, joysticks, power pads, and touch windows.

Integrated preschool: A preschool class that serves children with disabilities and typically developing peers in the same setting.

Integration: Participation of children with disabilities in regular classroom settings with typically developing children.

Integration (of technology): A process in which assistive technology is effectively utilized to provide a child who has disabilities equal opportunity to participate in ongoing curricular activities. It involves using technology to augment internal capabilities in the accomplishment of desired outcomes in academic, social, domestic, and community settings and involves awareness-building on the part of all staff and peers.

Interdisciplinary: A model of team organization characterized by professionals from several disciplines who work together to design, implement, and document goals for an individual child. Expertise and techniques are shared among the team so all members can assist the child in all domains; all members assess or provide direct service to the child.

Interface: A connection between a computer and an add-on peripheral device.

Interface card: A circuit board which can be inserted into one of the expansion slots to add specific capabilities to the computer. Examples are Adaptive Firmware Card™ or Echo™.

Interpersonal communication: Communication with others.

Intrapersonal communication: Communication with oneself.

I/O game port: Ports located on or in the computer that allow the user to plug in peripheral devices.

Itinerant services: Services provided by preschool special education teachers or related services personnel which occur in the setting where the child or the child and parent(s) are located as opposed to providing services at a centralized location.

Joy stick: An input device for the computer which has a control stick and two buttons. Rotating the stick moves the cursor in a circle. Pressing the buttons can control other program features.

K: Stands for kilo or 1,000 (actually 1,024) bytes of memory. A computer with 64K has storage for 64 kilobytes of data.

Keyguard: A plastic or metal sheet with finger-sized holes that covers a standard or alternative keyboard to help children who have poor motor control to select the desired keys.

LEA (Local Education Agency): The public school district which is responsible for a student's education.

Leaf switch: Flexible switch that is activated when bent or gently pressed.

Least restrictive environment (LRE): To the maximum extend appropriate, children with disabilities, including children in public or private institutions or other care facilities, are educated with children who are not disabled, and that special classes, separate schooling, or other removal of children with disabilities from the regular educational environment occurs only when the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

Manipulative play: Play in which a child acts upon objects in order to physically explore and control the objects.

Mask: A cardboard or plastic device that is placed over keyboard sections on a computer or communication device to block out unnecessary keys and assist the child in focusing on the target keys for a particular function.

Maximize: Making maximal use of the materials and environmental cues readily available in the typical early childhood environment in order to enhance the participation skills of children with disabilities within that classroom setting.

Megabyte: A unit of measure for computer memory. One megabyte equals 1,048,576 bytes or characters.

Memory: Computer chips which have the capacity to store information. Information stored in Read Only Memory (ROM) is stored permanently for the computer and cannot be erased. Random Access memory (RAM) is a temporary storage area for programs and data. RAM is erased when the computer is turned off and therefore must be stored on a disk or hard disk drive.

Mercury (tilt) switch: Gravity sensitive switch which activates when tilted beyond a certain point.

Modem: A peripheral device which allows a computer to send and receive data from another computer over the telephone lines.

Monitor: A screen which provides a visual display of the information being processed by the computer.

Motor planning: The discovery and execution of a sequence of new, non-habitual movements. Examples: Climbing through an unfamiliar obstacle course, learning to remove a sweatshirt or to tie a bow. Once the sequence is learned, it does not require motor planning to repeat it.

Mouse: A computer device that controls the pointer on the monitor. By clicking a mouse, a child can provide input to the computer.

Multifactored assessment: An evaluation of more than one area of a child's functioning so that no single procedure shall be the sole criterion for determining an appropriate educational decision. Such an evaluation includes professional staff from many disciplines.

Multidisciplinary; A model of team organization characterized by professionals from several discipines working independently who relate information concerning their work with an individual child to each other but do not coordinate, practice, or design a total educational program together.

Muppet learning keys: A touch sensitive keyboard designed specially for use with children. Letters and numbers are arranged in sequence, and keys are marked with colorful Muppet characters.

Norm-referenced tests: Tests that compare the performance of an individual against a group average or norm. Such tests often utilize standard scores, percentile ranks, age equivalencies, or developmental quotients.

Object permanence: The recognition of the existence of objects by children even after all or part of it is out of sight. Peek-a-boo is an early game to help baby begin to develop object permanence.

Observation: To take notice or pay attention to what children say and do in order to gather and record information for the purpose of interacting more effectively with them.

Open-ended materials: Materials which offer a wide range of opportunities for creativity and experimentation and that do not have just one or two ways in which a child can play with them.

Output: Any information that is transferred from the computer to another device such as a printer or speaker.

Output device: Any device that receives information from the computer and makes it available to the child in an understandable form. Output devices include monitors, printers, and speech synthesizers.

Overlay: Paper or plastic sheet which fits over a computer keyboard or electronic communication device containing symbols or icons depicting the information stored in the active areas below.

Parallel play: A situation in which a child plays independently with materials similar to those used by children playing in close proximity. Social contact is minimal.

Peer-initiated acitivity: A child becomes involved in an activity following the observation of a peer engaged in play or through invitation by that peer.

Peripheral: Any hardware device which is outside, but connected to, the computer. Peripherals include input and output devices such as joysticks, touch windows, adaptive keyboards, speech synthesizers, and printers.

Physical play: Action that is frequently social, may be competitive, and includes rough-and-tumble activities.

Plate switch: The most common type of switch. Downward pressure on plate causes circuit to be completed and connected object will be activated.

Play: Freely chosen, spontaneous, and enjoyable activities which assist in organizing cognitive learning, socialization, physical development, communication, etc.

Play-based assessment: Assessing children in a natural play-oriented setting as opposed to a traditional assessment environment in which the examiner controls the child's behavior through standardized testing procedures.

Play tutoring: An adult initiates a new play episode taking a dominant role and teaching the child new play behaviors.

Port: A socket on the back panel or on the logic board of the computer for connecting peripheral devices.

Power pad: A touch sensitive pad used as an alternate means of accessing the computer. Overlays define press areas necessary to activate special software programs.

Practice play: Involves the child's pleasurable repetition of skills that have been previously mastered.

Pressure sensitivity: Refers to the amount or degree of touch sensitivity required to activate a device.

Preventative approach to managing behavior: Adults set the stage for an environment that is child-centered, based on developmentally appropriate activities, expectations, and techniques, and organized to address positive discipline.

Printer: The device which produces a printed "hard copy" of the text or graphics from the computer.

Program: A set of instructions for the computer which allows it to carry out a specific function or task.

Programmable vocabulary: Refers to communication devices that can be programmed on site, as opposed to being returned to the manufacturer for programming.

Public domain software: Programs which are not copyrighted and are available for copying.

Public Law 94-142: A law passed in 1975 requiring that public schools provide a "free, appropriate public education" to school-aged children regardless of handicapping conditions (also called the Education of the Handicapped Act).

Public Law 99-457: *The Education of the Handicapped Act Amendments of 1986.* This law mandated services for preschoolers with disabilities and established the Part H program to assist states in the development of a comprehensive, multi-disciplinary, and statewide system of early intervention services for infants and toddlers (birth to age three).

Public Law 101-476: *The Education of the Handicapped Act Amendments of 1990.* This law changed the name of EHA to the Individuals with Disabilities Education Act (I.D.E.A.). The law reauthorized and expanded the discretionary programs, mandated that transition services and assistive technology services be included in a child's or youth's IEP, and added autism and traumatic brain injury to the list of categories of children and youth eligible for special education and related services among other things.

Pure-tone hearing test: Test that detects hearing loss using pure tones (frequencies) varing from 250 Hz to 8,000 Hz. This is the range that includes most speech sounds.

Rating scales: Tests used in making an estimate of a child's specific behaviors or traits.

Reliability: A measure of whether a test consistently measures what it was designed to measure. The focus is on consistency.

Role release: Mutual sharing of knowledge and expertise by professionals on a team in order to enhance service delivery to the child and family which enables each team member to carryout responsibilities traditionally assigned to another member of the team.

Running record: A narrative description involving a record of a child's behavior and relevant effects for a period of time.

Scanning: A process by which a range of possible responses is automatically stepped through. To select a response, the child activates the switch at the desired selection.

Screening: A process of identifying and referring children who may have early intervention needs for further assessment.

Self-control: The voluntary and internal regulation of behavior.

Shareware: Public domain software available for trial use prior to purchase.

Sip 'n puff: A type of switch which is activated by sipping or puffing on tubing.

Social competence: The ability of a child to interact in a socially acceptable and developmentally appropriate manner.

Software: The programs used by the computer which are available on both 3.5" and 5.25" disks.

Solitary play: A situation in which a child plays alone and independently with materials different from those used by children playing in close proximity. No social contact occurs.

Speech synthesizer: An output device which converts electronic text characters into artifical speech. A circuit card interfaces the computer and speaker, enabling the production of "spoken" output.

Standardized tests: Tests which include a fixed set of times that are carefully developed to evaluate a child's skills or abilities and allow comparison against a group average or norm.

Structured interview: An interview employing carefully selected questions or topics of discussion.

Structured observation: A situation in which the observer utilizes a predetermined system for recording child behaviors; also referred to as a systematic observation.

Structured play: Carefully planned activities with specific goals for adult/child, child/child, or child/materials interaction.

Summative evaluation: Evaluation strategies designed to measure program effectiveness.

Switch: A device that can be used to control an electronic object. A switch can be used as an alternative means of accessing an electronic toy or appliance, communication system, mobility device, or computer.

Switch interface: A connection between a switch and the object being controlled. A timer is an interface used to control how long the item will remain turned "on."

Switch latch interface: An interface which turns a device on and then off with each switch activation.

Symbolic play: Play in which a child uses one object to represent or symbolize another.

Synthesized speech: Speech that is produced by blending a limited number of sound segments. Because it is simply a combination of established sounds, it tends to sound robotic.

Systematic intervention: An approach which utilizes data collection to determine the effectiveness of the intervention.

Systematic observation: See "Structured Observation."

Tactile: Having to do with the sense of touch.

Teacher-directed activity: An activity in which the adult initiates and continues to supervise children's play. This type of supervision can be used to direct children, help them learn to initiate and attend to an activity, and to provide reinforcement for their participation.

Teacher-initiated activity: One in which the adult brings attention to an activity, but withdraws as children become involved and play on their own.

Time sampling: A type of systematic observation whereby tallies are used to indicate the presence or absence of specified behaviors over short periods of time.

Touch window: A touch sensitive screen designed as an alternative means of accessing the computer. The child simply touches the screen (attached to the monitor) to provide input to special computer programs.

Transdisciplinary: An effective team approach to IEP development and problem-solving which involves "role release" on the part of the team members resulting in problem-solving through a mutual sharing of all disciplinary perspectives. One professional is assigned the role of "primary" service provider.

Typically developing child: A child who is not identified as having a disability.

Unicorn keyboard: An alternative computer keyboard for use when a standard keyboard may not be accessable; 128 one-inch square keys can be redefined to create larger areas to accommodate the physicial capabilities of the child.

Unidisciplinary: Professionals from various disciplines (education, speech, motor, etc.) provide intervention services to the same child with little or no contact or consultation among themselves.

Unstructured play: Adult observes the child's play and attempts to fit into and be responsive to the play to the degree that the child allows or seems interested.

Validity: A measure of whether test items measure the characteristic(s), aptitude, intelligence, etc. that they were designed to measure.

VOCA: Voice output communication aid. This term refers to any electronic AAC approach which produces voice output.

Voice input: A voice recognition system which enables the computer to receive, recognize, and convert human voice input into data or other instructions.

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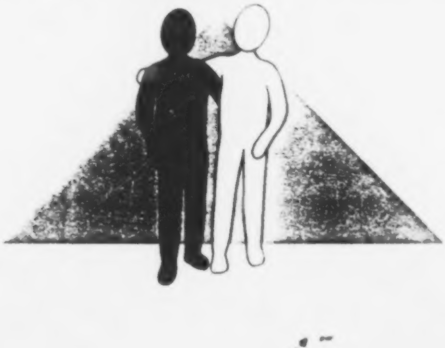
PROJECT PREPARE

Leaders Planning Guide
and
Evaluation Form

Managing Behaviors



LEADER PLANNING GUIDE

In order to assure successful in-service presentations, a number of critical items must be addressed by the leader before, during, and after the training day.

Before the Training Day:

______ Arrange for setting (e.g., meeting room, chairs, lunch, and audio visual materials and equipment)

______ Prepare and disseminate flyer

______ Review module and prepare presentation
  a. Review Glossary
  b. Collect or prepare materials needed for selected activities (e.g., toys, videos)

______ Duplicate necessary overheads and handouts

______ Prepare and duplicate agenda

______ Duplicate Pre/Posttest
(May be sent before session and returned with registration in order to assist in planning)

______ Duplicate participant evaluation form

______ Prepare a sign-in form in order to gather name and position (discipline) of participants

During the Training Day:

______ Require each participant to sign in

______ Provide each participant with:

  ______ Agenda

  ______ CEU information (if applicable)

  ______ Pre/Posttest

  ______ Necessary handouts

  ______ Participant evaluation form (end of the day)

______ Explain CEU process (if applicable)

______ Explain participant evaluation process

______ Have participants complete Pretest (if not completed earlier)

______ Present module seminar

______ Collect CEU information and checks (if applicable)

______ Have participants complete Posttest and participant evaluation form

______ Collect completed Posttest and participant evaluation forms

After the Training:

______ Complete the leader evaluation form

______ Mail a copy of the following to:
Project Prepare
Cuyahoga Special Education Service Center
14605 Granger Road
Maple Heights, Ohio 44137

______ Leader evaluation form

______ Compilation of Participant evaluation forms

*Are you seeking Project Prepare Certification? ____ Yes ____ No

*All qualified staff development leaders are encouraged to use the materials for the preparation of personnel who are working with young children who have special needs. Staff development leaders who wish to become certified Project Prepare Leaders are required to conduct a staff development session utilizating each of the nine Project Prepare modules. Each session must be at least five hours in length. Data regarding module certification will be gathered through the leader evaluation forms by Project Prepare, Cuyahoga Special Education Service Center. The names of the Project Prepare Certified Leaders will be placed on file with the Ohio Department of Education, Division of Early Childhood Education and the 16 Special Education Regional Resource Centers.

PROJECT PREPARE
LEADER EVALUATION FORM

Leader Name ______________________ Date ______________________

Agency ______________________ SERRC Region ______________________

Address ______________________ Module Title ______________________

____

Number of in-service participants __________

Using the sign-in form, please indicate the number of participants from the following disciplines or positions that attended the session.

Early Childhood Special Educator	( )	Special Educator	( )
Early Childhood Educator	( )	Administrator	( )
Occupational Therapist	( )	Psychologist	( )
Physical Therapist	( )	Teaching Assistant	( )
Speech/Language Therapist	( )	Parent	( )

Other (specify) ____

Please answer the following questions.

1. To what extent did these materials allow you to meet your in-service objective?

   ( ) Not at all ( ) Somewhat ( ) For the most part ( ) Completely

2. How would you rate the interest level of the activities?

   ( ) Low ( ) Average ( ) High

3. Would you recommend these materials to other professionals involved in early childhood staff development?

   ( ) Yes ( ) No

4. Comments ____

____

____

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____

____

PARTICIPANT EVALUATION FORM

INTRODUCTION: Thank you for attending this in-service session. We would appreciate receiving your feedback on the success of the training on the questions listed below. The information that you provide will be used to help us plan future events.

DIRECTIONS: Please answer item 1 by placing a (√) beside your current position. For items 2 through 9 check the response that most closely matches your feelings about each statement. Supply the requested information for items 11 through 13.

1. Current Position:
   - ( ) Early Childhood Special Education Teacher
   - ( ) Early Childhood Teacher
   - ( ) Special Education Teacher
   - ( ) Regular Education Teacher
   - ( ) Speech/Language Therapist
   - ( ) Physical Therapist
   - ( ) Occupational Therapist
   - ( ) Administrator
   - ( ) Teaching Assistant
   - ( ) Parent
   - ( ) Other (please specify) ________________

	Unacceptable	Poor	Average	Good	Excellent
2. Overall, I felt that the in-service session was	( )	( )	( )	( )	( )
3. I felt that the organization of the in-service activities was	( )	( )	( )	( )	( )
4. The presenter's approach to sharing information was	( )	( )	( )	( )	( )
5. My understanding of the information presented today is	( )	( )	( )	( )	( )
6. The way in which this session met my (professional/parenting) needs was	( )	( )	( )	( )	( )
7. The new ideas, skills, and/or techniques that I learned today are	( )	( )	( )	( )	( )

	Unacceptable	Poor	Average	Good	Excellent
8. My motivation level for using the information and/or techniques presented today is	( )	( )	( )	( )	( )
9. The way in which children and/or families that I work with will benefit from my attendance today is	( )	( )	( )	( )	( )

10. Would you recommend this workshop to others?

( ) Yes ( ) No

11. What were the most useful aspects of this in-service?

12. Which aspects of the training do you feel could be improved?

13. Do you have any specific needs related to this topic that were not met by this in-service?

( ) Yes ( ) No

If yes, what additional information would you like to receive?

Managing Behaviors (General)

PRE/POST TRAINING ASSESSMENT

Rate the following competencies as to your current level of knowledge and expertise.

0 = Not necessary in my position
1 = Truly unfamiliar
2 = A little knowledge
3 = Somewhat familiar
4 = Very knowledgeable

0	1	2	3	4	
					1. Recognize age appropriate developmental levels for preschoolers with and without special needs.
					2. Describe developmentally appropriate environments.
					3. Recognize the importance of preventative approaches to managing behavior including social competence, enhanced self-esteem, systematic interventions, and communication skills in a program for 3-5 year olds.
					4. Recognize the need to seek additional resources for individual child needs beyond the school setting.
					5. Describe an appropriate environmental/behavioral plan for an itinerant and center-based preschool setting that is either integrated or nonintegrated.

Comments: ______________________________

____

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____

Managing Behaviors (Staff)

PRE/POST TRAINING ASSESSMENT

Rate the following competencies as to your current level of knowledge and expertise.

0 = Not necessary in my position
1 = Truly unfamiliar
2 = A little knowledge
3 = Somewhat familiar
4 = Very knowledgeable

0	1	2	3	4	
					1. Define age appropriate developmental levels for preschoolers with and without disabilities for practical application.
					2. Develop appropriate environments for a preschool program.
					3. Understand the importance of preventative approaches to managing behavior: social competence, enhanced self-esteem, systematic interventions, communication skills in the growth of a child's self-control.
					4. Recognize the need to seek additional resources beyond the school setting to meet a child's individual needs.
					5. Develop an appropriate environment/behavioral plan for itinerant and/or center-based preschool programming in either an integrated or nonintegrated setting.

Comments: ____

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Managing Behaviors (Administrator)

PRE/POST TRAINING ASSESSMENT

Rate the following competencies as to your current level of knowledge and expertise.

0 = Not necessary in my position
1 = Truly unfamiliar
2 = A little knowledge
3 = Somewhat familiar
4 = Very knowledgeable

0	1	2	3	4	
					1. In terms of program development, define age appropriate developmental levels for preschoolers with and without disabilities.
					2. Recognize developmentally appropriate environments for a preschool program, either itinerant or center-based, in terms of design and implementation.
					3. Recognize that preventative approaches that lead to the development of self-control in the areas of social competence, enhanced self-esteem, systemtic interventions, and communication skills are necessary for success at the preschool level and as a child matures.
					4. Support the need to seek community resources for a child when needs exceed the scope of the school program.
					5. Support a program design that is based on developmentally appropriate practice as it focuses on a child's growth of self-control.

Comments: ____

____

____

____

____

PROJECT PREPARE

Modules for Competency-Based
Personnel Preparation in
Early Childhood Education

Managing Behaviors

General

GOALS

1. Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

2. Gain competency in developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

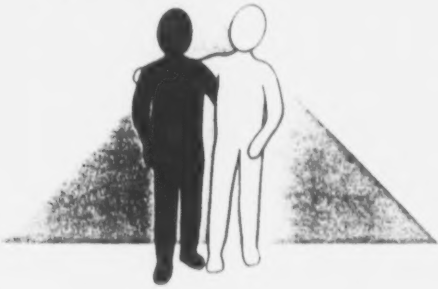
3. Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

4. Gain competency in knowing when and how to seek additional resources for managing behaviors that are beyond the scope of the school setting for individual child needs.

5. Develop an understanding of a philosophy which provides for the development of self-control that can be used to conceptualize a developmentally appropriate environment and behavior plan for either center-based or itinerant-based preschool learning for all children, those who are typically developing and those with disabilities.

GOAL 1

Managing Behaviors



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LEVEL: GENERAL

GOAL: **#1** Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: KNOWLEDGE

OBJECTIVE: Participants will understand the importance of developmental appropriateness in all areas of a child's development: physical, emotional, social, and cognitive.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Watch the video *An Ounce of Prevention* which discusses age expectancies for typically developing children. This is an optional activity dependent upon availability and time constraints.	1. Video *An Ounce of Prevention.* Ohio Disabilities Planning Council. Available through local SERRC.	1. Preview the video prior to presentation to match it to the expected needs of the audience. The video takes about 20 minutes. It starts with infancy; therefore, the last ten minutes may be more helpful to establish the basis for this objective. A chart to be used with the video is included in the next activities.
2. Large group activity Review the concept of ages and developmental expectancies.	2. Handouts (S-H1, 2 and 3) U.S. Government Printing Office. (1980). *Chart of normal development: Infancy to six years of age.* Ohio Disabilities Planning Council. *An ounce of prevention.* Bredekamp, S. (Ed.) (1987). *Developmentally appropriate practice in early childhood programs serving children from birth through age 8.*	2. Birth to three is given to participants for future reference with no intention of development. Two or three charts may be used. Most developmental charts agree, but minimal differences may be noted. Leader should discuss the idea of age and developmental expectancies. Participants may want to relate to some they find of particular interest. Developmentally appropriate practice is the backbone of setting the stage for developing self-esteem. *(continued on next page)*

LEVEL: GENERAL *(continued)*

GOAL: #1 Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: Participants will understand the importance of developmental appropriateness in all areas of a child's development: physical, emotional, social, and cognitive.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
		When discussing developmental levels, presenters need to remain sensitive to communicating "problems" to parents/caregivers who may not be fully aware of the potential disability. Gentleness may be critical. Primary areas within the various information that are relative to this module are: Communication Skills - Reception and Expressive; Cognitive Skills, and; Social Skills. If the population being trained represents a significant culture group, resources should be incorporated which are culture specific. In addition, discuss how diversity (e.g., ability, cultural, racial, religious, gender, etc.) might influence perceptions of development in general and young children's behaviors specifically.

CHART OF NORMAL DEVELOPMENT
(U.S. Government Printing Office, 1980)

24-36 MONTHS

Motor Skills		Communication Skills	
Gross Motor Skills	Fine Motor Skills	Understanding Language	Spoken Language
Runs forward well. Jumps in place, two feet together. Stands on one foot, with aid. Walks on tiptoe. Kicks ball forward.	Strings four large beads. Turns pages singly. Snips with scissors. Holds crayon with thumb and fingers, not fist. Uses one hand consistently in most activities. Imitates circular, vertical, horizontal strokes. Paints with some wrist action. Makes dots, lines, circular strokes. Rolls, pounds, squeezes, and pulls clay.	Points to pictures of common objects when they are named. Can identify objects when told their use. Understands question forms **what** and **where.** Understands negatives **no, not, can't,** and **don't.** Enjoys listening to simple storybooks and requests them again.	Joins vocabulary words together in two-word phrases. Gives first and last name. Asks **what** and **where** questions. Makes negative statements (for example, **Can't open it**). Shows frustration at not being understood.

Cognitive Skills		**Self-Help Skills**	**Social Skills**
Responds to simple directions (for example: **Give me the ball and the block. Get your shoes and socks).** Selects and looks at picture books, names pictured objects, and identifies several objects within one picture. Matches and uses associated objects meaningfully (for example, given cup, saucer, and bead, puts cup and saucer together). Stacks rings on peg in order of size. Recognizes self in mirror, saying, baby, or	Can talk briefly about what he or she is doing. Imitates adult actions (for example, housekeeping play). Has limited attention span. Learning is through exploration and adult direction (as in reading of picture stories). Is beginning to understand functional concepts of familiar objects (for example, that a spoon is used for eating) and part/whole concepts (for example, parts of the body).	Uses spoon, spilling little. Gets drink from fountain or faucet unassisted. Opens door by turning handle. Takes off coat. Puts on coat with assistance. Washes and dries hands with assistance.	Plays near other children. Watches other children, joins briefly in their play. Defends own possessions. Begins to play house. Symbolically uses objects, self in play. Participates in simple group activity (for example, sings, claps, dances). Knows gender identity.

G-H1

CHART OF NORMAL DEVELOPMENT (U.S. Government Printing Office, 1980)

36-48 MONTHS

Motor Skills

Gross Motor Skills

- Runs around obstacles.
- Walks on a line.
- Balances on one foot for 5 to 10 seconds.
- Hops on one foot.
- Pushes, pulls, steers wheeled toys.
- Rides (that is, steers and pedals) tricycle.
- Uses slide without assistance.
- Jumps over 15cm. (6″) high object, landing on both feet together.
- Throws ball overhead.
- Catches ball bounced to him or her.

Fine Motor Skills

- Builds tower of nine small blocks.
- Drives nails and pegs.
- Copies circle.
- Imitates cross.
- Manipulates clay materials (for example, rolls balls, snakes, cookies).

Communication Skills

Understanding Language

- Begins to understand sentences involving time concepts (for example, **We are going to the zoo tomorrow**).
- Understands size comparatives such as **big** and **bigger.**
- Understands relationships expressed by **if ... then** or **because** sentences.
- Carries out a series of two to four related directions.
- Understands when told, Let's **pretend.**

Spoken Language

- Talks in sentences of three or more words, which take the form agent-action-object (**I** see the ball) or agent-action-location (Daddy **sit** on chair).
- Tells about past experiences.
- Uses "s" on nouns to indicate plurals.
- Uses "ed" on verbs to indicate past tense.
- Refers to self using pronouns **I** or me.
- Repeats at least one nursery rhyme and can sing a song.
- Speech is understandable to strangers, but there are still some sound errors.

Cognitive Skills

- Recognizes and matches six colors.
- Intentionally stacks blocks or rings in order of size.
- Draws somewhat recognizable picture that is meaningful to child, if not to adult. Names and briefly explains picture.
- Asks questions for information (why and how questions requiring simple answers).
- Knows own age.
- Knows own last name.
- Has short attention span.
- Learns through observing and imitating adults, and by adult instruction and explanation. Is very easily distracted.
- Has increased understanding of concepts of the functions and groupings of objects (for example, can put doll house furniture in correct rooms), and part/whole (for example, can identify pictures of hand and foot as parts of body).
- Begins to be aware of past and present (for example: **Yesterday we went to the park. Today we go to the library**).

Self-Help Skills

- Pours well from small pitcher.
- Spreads soft butter with knife.
- Buttons and unbuttons large buttons.
- Washes hands unassisted.
- Blows nose when reminded.
- Uses toilet independently.

Social Skills

- Joins in play with other children. Begins to interact.
- Shares toys. Takes turns with assistance.
- Begins dramatic play, acting out whole scenes (for example, traveling, playing house, pretending to be animals).

CHART OF NORMAL DEVELOPMENT
(U.S. Government Printing Office, 1980)

48-60 MONTHS

Motor Skills		**Communication Skills**	
Gross Motor Skills	Fine Motor Skills	Understanding Language	Spoken Language
Walks backward toe-heel. Jumps forward 10 times, without falling. Walks up and down stairs alone, alternating feet. Turns somersault.	Cuts on line continuously. Copies cross. Copies square. Prints a few capital letters.	Follows three unrelated commands in proper order. Understands comparative like pretty, prettier, and prettiest. Listens to long stories but often misinterprets the facts. Incorporates verbal directions into play activities. Understands sequencing of events when told them (for example, First we have to go to the store, then we can make the cake, and tomorrow we will eat it).	Asks when, how, and why questions. Uses modals like can, will, shall, should, and might. Joins sentences together (for example, I like chocolate chip cookies and milk). Talks about causality by using because and so. Tells the content of a story but may confuse facts.

Cognitive Skills		**Self-Help Skills**	**Social Skills**
Plays with words (creates own rhyming words; says or makes up words having similar sounds). Points to and names four to six colors. Matches pictures of familiar objects (for example, shoe, sock, foot; apple, orange, banana). Draws a person with two to six recognizable parts, such as head, arms, legs. Can name and match drawn parts to own body. Draws, names, and describes recognizable picture. Rote counts to five, imitating adults.	Knows own street and town. Has more extended attention span. Learns through observing and listening to adults as well as through exploration. Is easily distracted. Has increased understanding of concepts of function, time, part/whole relationships. Function or use of objects may be stated in addition to names of objects. Time concepts are expanding. The child can talk about yesterday or last week (a long time ago), about today, and about what will happen tomorrow.	Cuts easy foods with a knife (for example, hamburger patty, tomato slice). Laces shoes.	Plays and interacts with other children. Dramatic play is closer to reality, with attention paid to detail, time, and space. Plays dress-up. Shows interest in exploring sex differences.

CHART OF NORMAL DEVELOPMENT
(U.S. Government Printing Office, 1980)

60-72 MONTHS

Motor Skills		Communication Skills	
Gross Motor Skills	Fine Motor Skills	Understanding Language	Spoken Language
Runs lightly on toes. Walks on balance beam. Can cover two meters (6′6″) hopping. Skips on alternate feet. Jumps rope. Skates.	Cuts out simple shapes. Copies triangle. Traces diamond. Copies first name. Prints numerals 1 to 5. Colors within lines. Has adult grasp of pencil. Has handedness well established (that is, child is left- or right-handed). Pastes and glues appropriately.	Demonstrates pre-academic skills.	There are few obvious differences between child's grammar and adult's grammar. Still needs to learn such things as subject-verb agreement, and some irregular past tense verbs. Can take appropriate turns in a conversation. Gives and receives information. Communicates well with family, friends, or strangers.

Cognitive Skills		**Self-Help Skills**	**Social Skills**
Retells story from picture book with reasonable accuracy. Names some letters and numerals. Rote counts to 10. Sorts objects by single characteristics (for example, by color, shape, or size if the difference is obvious). Is beginning to use accurately time concepts of tomorrow and yesterday. Uses classroom tools (such as scissors and paints) meaningfully and purposefully	Begins to relate clock time to daily schedule. Attention span increases noticeably. Learns through adult instruction. When interested, can ignore distractions. Concepts of function increase as well as understanding of why things happen. Time concepts are expanding into an understanding of the future in terms of major events (for example, Christmas will come after two weekends).	Dresses self completely. Ties bow. Brushes teeth unassisted. Crosses street safely.	Chooses own friend(s). Plays simple table games. Plays competitive games. Engages with other children in cooperative play involving group decisions, role assignments, fair play.

AN OUNCE OF PREVENTION EARLY INTERVENTION AND YOUR BABY (Ohio Disabilities Planning Council)

While it all seems like child's play, parents should know that everything their baby does from birth to age four is his real business ... the business of growing up healthy and strong. The physical things you see your baby do are called "motor skills". If the fine motor skills aren't developed, the child may have problems writing and reading. If the large body movement, the gross motor skills, don't come along, the youngster may be uncoordinated and find it hard to play and work with other kids.

It's easy to see how the slow development of these skills could put a child behind. And these problems can create emotional trouble for the child, too. If your baby does many of the things earlier than shown in this guide, great! Many kids do. But those who develop slower may be children who have special needs right now!

The person who has the best chance of catching a problem and getting help for the child is the person who knows and loves the child best. That's you ... the most important person in your baby's life.

Let's see how you can help your child grow up to be everything he or she can be by making sure some important events in growing up are reached. We call these events "milestones."

AGE
MILESTONE

8 to 10 weeks
- baby smiles

0 to 3 months
- baby sucks strongly
- baby has good muscle tone (not limp)
- baby has a good grip (not slack arms & legs)
- baby makes cooing noises
- baby will quiet when mom's voice is heard
- baby will look at you and make eye contact

3 to 5 months
- baby lifts head when laid on tummy
- baby laughs out loud
- baby tries different cries and noises — you know when he's mad or wet!
- baby is a copy cat — claps hands or opens mouth when you do

65

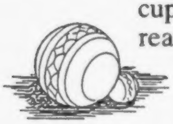
AGE
MILESTONE

6 to 9 months

- baby reaches for toys with either hand
- baby lifts head high while balancing on forearms
- baby's head is not at all wobbly
- baby responds to you as a favorite person
- baby turns head to a voice
- baby can roll over unassisted
- baby can usually sit without support by 8 months
- baby eats with fingers by 9 months
- baby can enjoy new games — can do patty-cake and peek-a-boo
- baby can wave bye-bye
- baby likes to look at his reflection in a mirror
- baby holds arms out when he wants to be held
- baby imitates familiar sounds like "ma-ma" or "da-da"

9 months to 1 year

- baby begins to say things like "ma-ma" with no coaching
- baby has a three-word vocabulary of things he really knows and can call for by around 1 year
- baby knows what "no-no" means, even though it's sometimes ignored
- baby can pull himself to a stand and move around with the furniture's support
- baby should put weight on his foot when walking (if baby walks on his toes, let pediatrician know)
- baby likes to look at pictures in books
- baby understands phrases like "give me that"
- baby usually will have mastered drinking with a cup
- baby can figure out that something out of sight is not gone — for example, looking for a ball under a cup (That's the beginning of reasoning!)



AGE
MILESTONE

1 to 1½ years

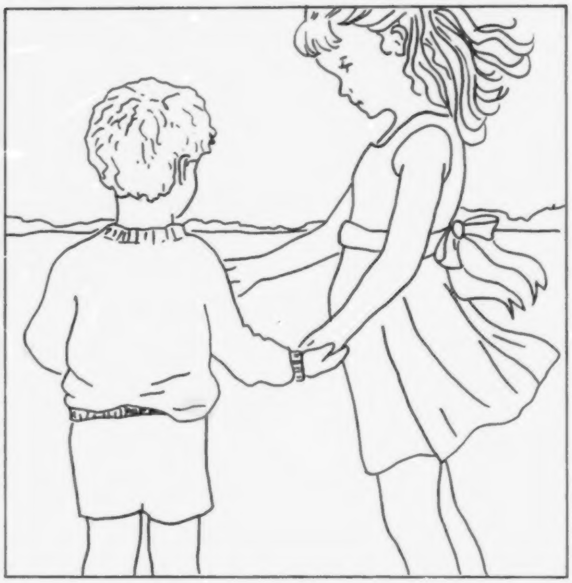
- baby usually has learned to stand alone
- baby is walking pretty well by 18 months
- baby sleeps through the night, unless sick or teething
- baby tries to feed self with spoon
- baby chews more, drools less
- baby can drink from a cup very well
- baby likes to dump and pick up things
- baby likes to imitate what you do — for example, sweeping, hammering, or pretending to read
- baby can point to things you call out in pictures
- baby likes to scribble
- baby can point to at least one body part
- baby can say lots of words — 7 to 20 are about right
- baby can make things happen — not just watch things happen (clue: look at how baby handles toys)

1½ to 2 years

- child may be trying to climb stairs
- child is curious about everything
- child can handle crayons pretty well and can draw a line
- child can build a tower four blocks high
- child knows lots of words, and can combine two words now — verbs like "go" and adjectives like "pretty"
- child can call himself by own name
- child recognizes lots of things in pictures — for example, which is "doggie" or "cow"
- child can name more than three body parts
- child can follow simple directions

AGE
MILESTONE

2 to 3 years
- child recognizes and expresses emotion
- child demonstrates "I'm me" in a lot of ways, sometimes negative
- child tells you what he wants — sometimes will demand it (it's a baby's way of learning to be a separate person)
- child dresses himself with help
- child runs pretty well
- child can speak in simple phrases (although at this age, some children may be hard to understand)
- child can build a tower of eight blocks
- child can pedal a tricycle
- child can jump in place
- child can understand and tell you he is cold, hungry, or tired



AGE
MILESTONE

3 to 4 years
- child can use the toilet with few accidents (if not, don't worry — this skill means less than lots of other things like motor development and learning to speak clearly)
- child can balance first on one foot, then on the other
- child can copy simple designs
- child can count to three
- child knows two to three colors
- child knows his first and last name (if you've taught him)
- child talks pretty well now and even people outside the family can understand him (you shouldn't need to translate anymore — if not, check with a speech professional to be sure)

3 to 4 years
- child can follow directions that have more than one step (like "take off your jacket and pick up your toys")
- child will be trying to wash his face and brush his teeth
- child can separate easily from you now to play with friends

WHAT SHOULD YOU DO IF YOU THINK YOUR BABY MAY HAVE SPECIAL NEEDS AFTER EXAMINING THESE "MILESTONES"?

1. *Congratulate yourself for not waiting.*

2. *Talk to your pediatrician or doctor about your worries to make sure your baby isn't being delayed because he can't hear or see well.*

- Have the physical things checked out first
- Point out the things you've noticed
- Don't hesitate to ask persistent questions
- Have your doctor, clinic, or public health nurse point you toward an agency which works with youngster's special needs

3. *Look in your community for resources that are available by checking your phone book ... really look — there's help available! Look up*

- *Mental health, child guidance or mental retardation/developmental disabilities agencies* — these agencies often deal with children's developmental problems
- Your *local school system*
  - — All states require their schools to find special youngsters from birth, not just after they enter school
  - — Ohio's schools are required to evaluate kids and help diagnose developmental and learning problems
- An organization in Ohio called *the Bureau of Crippled Children's Services* — don't let the term "crippled" mislead you ... the agency works for kids with all kinds of problems
- *Family Service Agencies — United Way Health Agencies* and *Children's Hospitals* can often get you with the professional who can help your child
- *Parents' organizations* which are specifically set up to help kids with certain problems ... the parents get important help too (groups like *United Cerebral Palsy, the Association for Children and Adults with Learning Disabilities,* or *the Association for Retarded Citizens* in Ohio)
- *Local colleges and universities* — they may have people who can point you in the right direction (try the departments of education, child development or nursing to start)
- Ohio's two excellent resources for figuring out what special services your child may need — *The Nisonger Center* in Columbus and *The Cincinnati Center for Developmental Disorders*
- Centers called *Special Education Regional Resource Centers* — they can help you judge whether your child needs an extra boost, and may know what pre-school programs are available in your community to help (including *Head Start*)

4. *Let's not forget the most important resource of all ... you!*

- Play with your child spontaneously as most parents do ... practicing skills and praising each small accomplishment
- A child with special needs may require a little more help — you may have to do the play activities more often or in different ways ... fun things any parent can learn to do

Will this all be worth it? You bet! You'll be giving your baby the best start possible. Your baby will be one of the lucky ones who have concerned parents to care for them. Your baby is lucky to have you!

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DEVELOPMENTALLY APPROPRIATE PRACTICE IN EARLY CHILDHOOD PROGRAMS SERVING CHILDREN FROM BIRTH THROUGH AGE 8

Expanded Edition

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PART 4

DEVELOPMENTALLY APPROPRIATE PRACTICE IN PROGRAMS FOR 3-YEAR-OLDS

The 3-year-old is sometimes overlooked when periods of development are described in broad categories like "toddlers" or "preschoolers." But the fourth year of life is a distinct period of development with its own unique challenges and accomplishments. Teachers in programs serving 3-year-olds, as in all early childhood programs, must consider what is appropriate for this age group in general as well as what is specifically appropriate for the individual children in their care.

Three-year-olds are no longer toddlers but they will behave like toddlers at times; at other times their language ability and motor skills will deceptively mimic the 4-year-old. The key for the teacher of 3s is to maintain appropriate expectations; teachers should not expect too little of 3-year-olds, nor should they expect too much. To care for and educate a group of 3s, teachers need to fully understand the developmental continuum from toddlerhood through the preschool years. At 2½, many children begin to display skills and behaviors most typical of 3-year-olds. Thus, children between 2½ and 3½ years of age are often similar developmentally; and some 3½-year-olds share traits of 4s. The common practice of multiage grouping, putting children of a wide age span together, further necessitates that teachers fully understand the continuum of development during the early years.

The following statement describes some developmentally appropriate and inappropriate practices specifically related to 3-year-olds. *This statement is not intended to describe a comprehensive program for 3s. It is intended to be used with the statement on appropriate practice for toddlers* (pages 40-46) *and the statement on appropriate practice for 4- and 5-year-olds* (pages 51- 59).

Living and Learning With 3-Year-Olds: Interactions Among Adults and Children and Appropriate Curriculum

APPROPRIATE Practice	INAPPROPRIATE Practice
• Adults provide affection and support, comforting children when they cry and reassuring them when fearful. Adults plan experiences to alleviate children's fears.	• Adults are cold or distant and do not express physical affection, comfort, or emotional bolstering. Adults assume children will get over fears.
• Adults support 3-year-olds' play and developing independence, helping when needed, but allowing them to do what they are capable of doing and what they want to do for themselves ("I can do it myself!").	• Adults expect 3-year-olds to be independent and to entertain themselves for long period of time; they are impatient, hurry children, and do tasks for children that they could do themselves.
• Adults recognize that, although 3-year-olds are usually more cooperative than toddlers and want to please adults, they may revert to toddler behavior (thumb-sucking, crying, hitting, baby talk) when they are feeling shy or upset, especially in a new situation. Adults know that 3-year-olds' interest in babies, and especially their own recent infancy, is an opportunity for children to learn about themselves and human development.	• Adults expect too much of 3-year-olds and ridicule them when they behave immaturely or play baby ("You're acting like a baby!").
• Adults provide opportunities for 3-year-olds to demonstrate and practice their newly developed self-help skills and their desire to help adults with dressing and undressing, toileting, feeding themselves (including helping with pouring milk or setting the table), brushing teeth, washing hands, and helping pick up toys. Adults are patient with occasional toileting accidents, spilled food, and unfinished jobs.	• Adults perform routine tasks (like dressing and cleaning up) for children because it is faster and less messy. Adults punish or shame children for toileting accidents and do not allow children to play with their food. Adults insist that children pick up all the toys every time.
• Adults know that growth rates may slow down and appetites decrease at this age. Children are encouraged to eat "tastes" in small portions with the possibility of more servings if desired.	• Adults serve children a large meal which they are expected to eat. Disciplinary pressures accompany demands for food consumption.
• Adults guide 3-year-olds to take naps or do restful activities periodically throughout the day, recognizing that these younger children may exhaust themselves — especially when trying to keep up with older children in the group.	• Naptime is either forced or not provided. Children are scolded for being cranky or tired as the day progresses.

3-YEAR-OLDS 3-YEAR-OLDS 3-YEAR-OLDS 3-YEAR-OLDS

APPROPRIATE Practice	**INAPPROPRIATE Practice**
• Adults provide many opportunities for 3s to play by themselves; next to another child (parallel play), or with one or two other children. Adults recognize that 3-year-olds are not comfortable with much group participation. Adults read a story or play music with small groups and allow children to enter and leave the group at will.	• Adults expect children to participate in whole group activities. They read a story to all the children at once, expecting them all to sit and listen quietly. They do not allow children to leave the large group activity.
• Adults support children's beginning friendships, recognizing that such relationships ("my best friend") are short-lived and may consist of acting silly together or chasing for a few minutes. When conflicts arise, the 3-year-old will often return to playing alone. Adults encourage children to take turns and share but do not always expect children to give up favored items.	• Adults expect that children will always want to play with their "friends" and require that they do activities together or share toys. Adults pick out friends for children and keep pairs together over time.
• Adults provide plenty of space and time indoors and outdoors for children to explore and exercise their large muscle skills like running, jumping, galloping, riding a tricycle, or catching a ball, with adults close by to offer assistance as needed.	• Adults restrict children's physical activity ("No running!") or provide limited space and little equipment for large muscle outdoor activity. Adults limit large muscle activity to a short outdoor recess time.
• Adults provide large amounts of uninterrupted time for children to persist at self-chosen tasks and activities and to practice and perfect their newly developed physical skills if they choose.	• Adults become impatient with children who want to repeat a task or activity again and again, OR they force children to repeat tasks that adults have selected as learning activities whether the child is interested or not.
• Adults provide many materials and opportunities for children to develop fine motor skills such as puzzles, pegboards, beads to string, construction sets, and art materials (crayons, brushes, paints, markers, play dough, blunt scissors). Although children's scribbles are more controlled than those of toddlers, and 3-year-olds will create designs with horizontal and vertical strokes, and will sometimes name their drawings and paintings, adults do not expect a representational product. Art is viewed as creative expression and exploration of materials.	• Adults expect children to demonstrate fine motor skills by cutting out figures or shapes, by coloring within the lines in coloring books or on ditto sheets, or following the teacher's directions and model to create identical art products. When children draw or paint pictures, teachers ask "What is it?" and lead children to believe that only a representational picture is valued.

APPROPRIATE Practice	**INAPPROPRIATE Practice**
• Adults provide plenty of materials and time for children to explore and learn about the environment, to exercise their natural curiosity, and to experiment with cause and effect relationships. For example, they provide blocks (that children line up first and later may build into towers); more complex dramatic play props (for playing work and family roles and animals); sand and water with tools for pouring, measuring, and scooping; many toys and tools to experiment with like knobs, latches, and any toy that opens, closes, and can be taken apart; and simple science activities like blowing bubbles, flying kites, or planting seeds.	• Adults may provide blocks and dramatic play areas but have definite ideas about how these areas should be used and restrict materials to the designated area of the room. Water play and sand play are not provided because they are too messy and difficult to supervise. Adults do not provide toys and tools to use in take-apart activities because they require too much time to clean up.
• Adults encourage children's developing language by speaking clearly and frequently to individual children and listening to their response. Adults respond quickly and appropriately to children's verbal initiatives. They recognize that talking may be more important than listening for 3-year-olds. Adults patiently answer children's questions ("Why?" "How come?") and recognize that 3-year-olds often ask questions they know the answers to in order to open a discussion or practice giving answers themselves. Adults know that children are rapidly acquiring language, experimenting with verbal sounds, and beginning to use language to solve problems and learn concepts.	• Adults attempt to maintain quiet in the classroom and punish children who talk too much. Adults speak to the whole group most of the time and only speak to individual children to admonish or discipline them. Adults ridicule children's asking of rhetorical question by saying "Oh, you know that."
• Adults provide many experiences and opportunities to extend children's language and musical abilities. Adults read books to one child or a small group; recite simple poems, nursery rhymes and finger plays; encourage children to sing songs and listen to recordings; facilitate children's play of circle and movement games like London Bridge, Farmer in the Dell, and Ring Around the Rosie; provide simple rhythm instruments; listen to stories that children tell or write down stories they dictate; and enjoy 3-year-olds' sense of humor.	• Adults limit language and music activities because children sometimes become too silly or loud, OR they include story time and music time only as a whole group activity and require children to participate. Adults discipline children for using silly or nonsense language.

3-YEAR-OLDS 3-YEAR-OLDS 3-YEAR-OLDS 3-YEAR-OLDS

APPROPRIATE Practice	INAPPROPRIATE Practice
• Adults know that 3-year-olds do not usually understand or remember the rules. Guidance reasons that are specific to a real situation and that are demonstrated repeatedly are more likely to impress young children.	• Adults expect children to remember and abide by a list of classroom rules. Children are scolded and belittled for not remembering and applying a rule.
• Adults provide a safe, hazard-free environment and careful supervision. Adults recognize that 3-year-olds often overestimate their newly developed physical powers and will try activities that are unsafe or beyond their ability (especially in multiage groups where they may model 4- and 5-year-olds). Adults protect children's safety in these situations while also helping them deal with their frustration and maintain their self-confidence ("Joel can tie his shoe because he's 5; when you're 5, you'll probably know how to tie, too.").	• Adults are careless about supervision especially when 3-year-olds are in a group of mostly 4- and 5-year-olds who are capable of more self-monitoring and control of their own bodies.

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See references on pages 14-16, 32-33, and 61.

G-H3

INTEGRATED COMPONENTS OF APPROPRIATE AND INAPPROPRIATE PRACTICE FOR 4- AND 5-YEAR-OLD CHILDREN

Component	APPROPRIATE Practice	INAPPROPRIATE Practice
Curriculum goals	• Experiences are provided that meet children's needs and stimulate learning in all developmental areas — physical, social, emotional, and intellectual.	• Experiences are narrowly focused on the child's intellectual development without recognition that all areas of a child's development are interrelated.
	• Each child is viewed as a unique person with an individual pattern and timing of growth and development. The curriculum and adults' interaction are responsive to individual differences in ability and interests. Different levels of ability, development, and learning styles are expected, accepted, and used to design appropriate activities.	• Children are evaluated only against a predetermined measure, such as a standardized group norm or adult standard of behavior. All are expected to perform the same tasks and achieve the same narrowly defined, easily measured skills.
	• Interactions and activities are designed to develop children's self-esteem and positive feelings toward learning.	• Children's worth is measured by how well they conform to rigid expectations and perform on standardized tests.
Teaching strategies	• Teachers prepare the environment for children to learn through active exploration and interaction with adults, other children, and materials.	• Teachers use highly structured, teacher-directed lessons almost exclusively.
	• Children select many of their own activities from among a variety of learning areas the teacher prepares, including dramatic play, blocks, science, math, games and puzzles, books, recordings, art, and music.	• The teacher directs all the activity, deciding what children will do and when. The teacher does most of the activity for the children, such as cutting shapes, performing steps in an experiment.
	• Children are expected to be physically and mentally active. Children choose from among activities the teacher has set up or the children spontaneously initiate.	• Children are expected to sit down, watch, be quiet, and listen, or do paper-and-pencil tasks for inappropriately long periods of time. A major portion of time is spent passively sitting, listening, and waiting.

Component	**APPROPRIATE Practice**	**INAPPROPRIATE Practice**
	• Children work individually or in small, informal groups most of the time.	• Large group, teacher-directed instruction is used most of the time.
	• Children are provided concrete learning activities with materials and people relevant to their own life experiences.	• Workbooks, ditto sheets, flashcards, and other similarly structured abstract materials dominate the curriculum.
	• Teachers move among groups and individuals to facilitate children's involvement with materials and activities by asking questions, offering suggestions, or adding more complex materials or ideas to a situation.	• Teachers dominate the environment by talking to the whole group most of the time and telling children what to do.
	• Teachers accept that there is often more than one right answer. Teachers recognize that children learn from self-directed problem solving and experimentation.	• Children are expected to respond correctly with one right answer. Rote memorization and drill are emphasized.
Guidance of social-emotional development	• Teachers facilitate the development of self-control in children by using positive guidance techniques such as modeling and encouraging expected behavior, redirecting children to a more acceptable activity, and setting clear limits. Teachers' expectations match and respect children's developing capabilites.	• Teachers spend a great deal of time enforcing rules, punishing unacceptable behavior, demeaning children who misbehave, making children sit and be quiet, or refereeing disagreements.
	• Children are provided many opportunities to develop social skills such as cooperating, helping, negotiating, and talking with the person involved to solve interpersonal problems. Teachers facilitate the development of these positive social skills at all times.	• Children work individually at desks or tables most of the time or listen to teacher directions in the total group. Teachers intervene to resolve disputes or enforce classroom rules and schedules.

Component	APPROPRIATE Practice	INAPPROPRIATE Practice
Language development and literacy	• Children are provided many opportunities to see how reading and writing are useful before they are instructed in letter names, sounds, and word identification. Basic skills develop when they are meaningful to children. An abundance of these types of activities is provided to develop language and literacy through meaningful experience: listening to and reading stories and poems; taking field trips; dictating stories; seeing classroom charts and other print in use; participating in dramatic play and other experiences requiring communication; talking informally with other children and adults; and experimenting with writing by drawing, copying, and inventing their own spelling.	• Reading and writing instruction stresses isolated skill development such as recognizing single letters, reciting the alphabet, singing the alphabet song, coloring within predefined lines, or being instructed in correct formation of letters on a printed line.
Cognitive development	• Children develop understanding of concepts about themselves, others, and the world around them through observation, interacting with people and real objects, and seeking solutions to concrete problems. Learnings about math, science, social studies, health, and other content areas are all integrated through meaningful activities such as those when children build with blocks; measure sand, water, or ingredients for cooking; observe changes in the environment; work with wood and tools; sort objects for a purpose; explore animals, plants, water, wheels and gears; sing and listen to music from various cultures; and draw, paint, and work with clay. Routines are followed that help children keep themselves healthy and safe.	• Instruction stresses isolated skill development through memorization and rote, such as counting, circling an item on a worksheet, memorizing facts, watching demonstrations, drilling with flashcards, or looking at maps. Children's cognitive development is seen as fragmented in content areas such as math, science, or social studies, and times are set aside to concentrate on each area.

4- AND 5-YEAR-OLDS	4- AND 5-YEAR-OLDS	4- AND 5-YEAR-OLDS
Component	**APPROPRIATE Practice**	**INAPPROPRIATE Practice**
Physical development	• Children have daily opportunities to use large muscles, including running, jumping, and balancing. Outdoor activity is planned daily so children can develop large muscle skills, learn about outdoor environments, and express themselves freely and loudly.	• Opportunity for large muscle activity is limited. Outdoor time is limited because it is viewed as interfering with instructional time or, if provided, is viewed as recess (a way to get children to use up excess energy), rather than an integral part of children's learning environment.
	• Children have daily opportunities to develop small muscles skills through play activities such as pegboards, puzzles, painting, cutting, and other similar activities.	• Small motor activity is limited to writing with pencils, or coloring predrawn forms, or similar structured lessons.
Aesthetic development	• Children have daily opportunities for aesthetic expression and appreciation through art and music. Children experiment and enjoy various forms of music. A variety of art media are available for creative expression, such as easel and finger painting and clay.	• Art and music are provided only when time permits. Art consists of coloring predrawn forms, copying an adult-made model of a product, or following other adult-prescribed directions.
Motivation	• Children's natural curiosity and desire to make sense of their world are used to motivate them to become involved in learning activities.	• Children are required to participate in all activities to obtain the teacher's approval, to obtain extrinsic rewards like stickers or privileges, or to avoid punishment.
Parent-teacher relations	• Teachers work in partnership with parents, communicating regularly to build mutual understanding and greater consistency for children.	• Teachers communicate with parents only about problems or conflicts. Parents view teachers as experts and feel isolated from their child's experience.
Assessment of children	• Decisions that have a major impact on children (such as enrollment, retention, assignment to remedial classes) are based primarily on information obtained from observations by teachers and parents, not on the basis of a single test score. Developmental assessment of children's progress and achievement is used to plan curriculum, identify children with special needs, communicate with parents, and evaluate the program's effectiveness.	• Psychometric tests are used as the sole criterion to prohibit entrance to the program or to recommend that children be retained or placed in remedial classrooms.

Component	APPROPRIATE Practice	INAPPROPRIATE Practice
Program entry	• In public schools, there is a place for every child of legal entry age, regardless of the developmental level of the child. No public school program should deny access to children on the basis of results of screening or other arbitrary determinations of the child's lack of readiness. The educational system adjusts to the developmental needs and levels of the children it serves; children are not expected to adapt to an inappropriate system.	• Eligible-age children are denied entry to kindergarten or retained in kindergarten because they are judged not ready on the basis of inappropriate and inflexible expectations.
Teacher qualifications	• Teachers are qualified to work with 4- and 5-year-olds through college-level preparation in Early Childhood Education or Child Development and supervised experience with this age group.	• Teachers with no specialized training or supervised experience working with 4- and 5-year-olds are viewed as qualified because they are state certified, regardless of the level of certification.
Staffing	• The group size and ratio of teachers to children is limited to enable individualized and age-appropriate programming. Four- and 5-year-olds are in groups of no more than 20 children with two adults.	• Because older children can function reasonably well in large groups, it is assumed that group size and number of adults can be the same for 4- and 5-year-olds as for elementary grades.

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LEVEL: GENERAL

GOAL: **#1** Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: Participants will understand the importance of developmental appropriateness in all areas of a child's development: physical, emotional, social, and cognitive.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
3. Large or small group activity Match activities to age and developmental expectancies.	3. Worksheet (G-W1) *Appropriate Activities at Age and Development* Using charts of development, participants will match activities to age.	3. Do quickly. May divide team into groups. Important to have participants find out what is included in the charts and become familiar with the concept. A booklet, *How does your child grow and learn?*, listing many expectations is sometimes used by the County Health Clinics and is a good resource for distribution. It is available through TOPS (Training Ohio Parents for Success). Leader may ask "How might your response be different for children of Hispanic homes? Asian? Native Americans? If possible, each participant should receive a copy of *Developmentally appropriate practice in early childhood programs serving children from birth through age 8.*

G-W1

APPROPRIATE ACTIVITIES AT AGE AND DEVELOPMENT

DIRECTIONS: Using charts, locate the ages when these skills are appropriate.

ACTIVITY	AGE
Uses toilet with few accidents	
Can copy simple designs	
Can follow simple instructions with more than one step	
Can balance first on one foot and then another	
Can learn his first and last name	
Can be understood by people out of the family	
Can wash hands after restroom, lunch, or an activity	
Knows 2 to 5 colors; counts to 3	
Can catch a ball bounced to him	
Understands "Let's Pretend"	
Rides a tricycle; steers wheeled toys	
Says sentences of three or more words	
May join in play with other children	
May revert to baby or toddler behaviors	
Will want to do things for self	
Should be encouraged to share, but may not give up a prized possession	
Scribbles	
Plays freely with blocks, puzzles, toys	
Does not understand or follow rules	
Listens to stories, poems, fingerplays	
Asks who, what, why questions	
Points to and names six colors	
Draws, names and describes a recognizable picture	
Prints a few capital letters	

LEVEL: GENERAL

GOAL: #1 Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: SKILL

OBJECTIVE: Participants will define developmentally appropriate as it relates to typically developing preschoolers and children with disabilities.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Review definition of developmental appropriateness.	1. Handout (G-H4) Transparency (G-T1) *Definition of Developmental Appropriateness* NAEYC position statement will be discussed.	1. Review the concept of age appropriateness especially as it relates to children with disabilities. A child who has cognitive developmental delays should not be limited to experiences that are at the developmental age instead of those appropriate for the child's typically developing peers. Caution should be taken that a child with physical handicaps is not limited to expectations in other domains that are not age appropriate. In particular note how the definition relates to expectations of young children's behavior.

DEFINITION OF DEVELOPMENTAL APPROPRIATENESS

NATIONAL ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN

November 1986

The concept of developmental appropriateness has two dimensions: age appropriateness and individual appropriateness.

Age Appropriateness:

Human development research indicates that there are universal, predictable sequences of growth and change that occur in children during the first nine years of life. These predictable changes occur in all domains of development — physical, emotional, social, and cognitive. Knowledge of typical development of children within the age span served by the program provides a framework from which teachers prepare the learning environment and plan appropriate experiences.

Individual Appropriateness:

Each child is a unique person with an individual pattern and timing of growth, as well as individual personality, learning style, and family background. Both the curriculum and adults' interactions with children should be responsive to individual differences. Learning in young children is the result of interaction between the child's thoughts and experiences with materials, ideas, and people. These experiences should match the child's developing abilities while also challenging the child's interest and understanding.

NAEYC, November 1986

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National Association for the Education of Young Children, November 1986

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National Association for the Education of Young Children, November 1986

LEVEL: GENERAL

GOAL: **#1** Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: SKILL *(continued)*

OBJECTIVE: Participants will define developmentally appropriate as it relates to typically developing preschoolers and children with disabilities.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Large or small group activity Describe real-life situations from home or school with children aged 3-5 who are typically developing and/or children aged 3-5 with disabilities and relate them to a developmental level as outlined on the Handout from the previous activities.	2. Worksheet/Transparency (G-W2, G-T2) *Personal Experience with Appropriate Developmental Practices*	2. Two situations are presented to initiate this activity. Participants are to brainstorm other situations from their own experience to add to the worksheet. This should take only a few minutes; then discuss. Encourage them to note how a developmental level influenced children's behavior. In addition, note how diversity (e.g., ability, cultural, racial, religious, gender, etc.) may have influenced the situations described.

G-W2

PERSONAL EXPERIENCE WITH APPROPRIATE DEVELOPMENTAL PRACTICES

DIRECTIONS: Write a brief situation, either positive or negative, in terms of developmentally appropriate practices at home or preschool. If negative, determine a way to remedy the inappropriate practice. Two samples are included:

1. The teacher of a preschool class for 3- to 5-year-olds initiates all activities deciding what children will do and when.

   Appropriate? No
   Remedy: Children should select from a variety of teacher-made appropriate activities each day.

2. When a child demonstrates an unacceptable behavior, the teacher directs the child to a more acceptable activity.

   Appropriate? Yes
   Remedy: None needed.

3.

   Appropriate?
   Remedy:

4.

   Appropriate?
   Remedy:

5.

   Appropriate?
   Remedy:

6.

   Appropriate?
   Remedy:

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PERSONAL EXPERIENCE WITH APPROPRIATE DEVELOPMENTAL PRACTICES

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   Appropriate? No

   Remedy: Children should select from a variety of teacher-made appropriate activities each day.

2. When a child demonstrates an unacceptable behavior, the teacher directs the child to a more acceptable activity.

   Appropriate? Yes

   Remedy: None needed.

3.

   Appropriate?

   Remedy:

4.

   Appropriate?

   Remedy:

LEVEL: GENERAL

GOAL: **#1** Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: SKILL *(continued)*

OBJECTIVE: Participants will define developmentally appropriate as it relates to typically developing preschoolers and children with disabilities.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
3. Large group activity Using some of the same scenarios from previous worksheets, participants will discuss the effect of different disabilities on results.	3. Worksheet/Transparency (G-W3, G-T3) *Developmentally appropriate practices for children with disabilities.*	3. A worksheet is provided with some disabilities listed. Participants are to use the same situations as developed before with the addition of the disability. Note how particular disabilities might influence a child's behavior in particular scenarios. Creativity in ways to modify for the disability are encouraged. These could be done in small group — one section per group. Follow with discussion.

DEVELOPMENTALLY APPROPRIATE PRACTICES FOR CHILDREN WITH DISABILITIES

DIRECTIONS: Using the appropriate situations developed in the previous activity, add the listed disability and determine modifications.

1. Orthopedic Disability

2. Visual Disability

3. Cognitive Delays

4. Hearing Disabled

5. Autism

6. Delays in cognition, expressive language, adaptive behaviors, particularly socialization, and unable to use motor control from waist down.

G-T3

DEVELOPMENTALLY APPROPRIATE PRACTICES FOR CHILDREN WITH DISABILITIES

1. Orthopedic Disability

2. Visual Disability

3. Cognitive Delays

4. Hearing Disability

5. Autism

6. Delays in cognition, expressive language, adaptive behaviors, particularly socialization, and unable to use motor control from waist down.

LEVEL: GENERAL

GOAL: #1 Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: VALUE/ATTITUDE

OBJECTIVE: Participants will appreciate the importance of matching expectations to developmental milestones.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Small group activity Match expectations to developmentally appropriate practices from case study descriptions.	1. Handout/Transparency (G-H5, G-T4) *Expectations Considerations*	1. Assign each of these situations to a small group. After a few minutes ask them to share their thoughts. Discuss reasons that these expectations are important and how they influence the behavior of young children. Ask participants to note how diversity (e.g., ability, cultural, racial, religious, gender, etc.) might influence expectations in these situations.

EXPECTATIONS CONSIDERATIONS

DIRECTIONS: List the expectancies that would be important considerations for children in the following situations.

1. Jon is four years old in a community-based integrated preschool. He is unable to talk to adults or peers, but understands them at an age-appropriate level.

   What would be important considerations during his preschool years?

2. Sarah, a four year old, is cognitively delayed and very shy. She has never been away from her family until she started preschool. She cries each day when her mother leaves her at the door.

   What would be important considerations during her preschool years?

3. Destinie is a three year old who attends a shared classroom situation with other three year olds three mornings a week. She is quite verbal, but rarely interacts with other children. She often grabs things from others and is quick to scream when she is challenged. She flits from activity to activity. Parents feel she is just a normal three year old.

   What would be important considerations during her preschool years?

4. Jewel is very bright according to evaluation data. He does not follow directions. He does not remember from one minute to the next what he has been asked to do. It is November, and he still has not shown any ability to follow any routine. He will play with Legos by himself for extended periods, but does not choose other activities. If the Legos are not available, he does not select an activity. He just sits on the floor in a quiet place.

   What would be important considerations during his preschool years?

5. Sherry is a four-year-old child who has spina bifida. She is very independent. All other areas of development other than large motor areas are developing normally.

   What would be important considerations during her preschool years?

G-T4

EXPECTATIONS CONSIDERATIONS

1. JON

2. SARAH

3. DESTINIE

4. JEWEL

5. SHERRY

LEVEL: GENERAL

GOAL: **#1** Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: VALUE/ATTITUDE *(continued)*

OBJECTIVE: Participants will appreciate the importance of matching expectations to developmental milestones.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Large group activity Brainstorm the positive results of matching expectations to developmental appropriateness. Are expectations different for different cultures?	2. Transparency/Handout (G-T5) *Positive Results of Matching Expectations to Developmental Appropriateness*	2. List several positive results on the Transparency. Some examples that should be elicited from the group are: – Preventing inappropriate behaviors – Involvement with peer group – Overlooking the disability – Seeing a child with a disability stretch beyond expectations – Acceptance by the peer group of uniqueness of each other

POSITIVE RESULTS OF MATCHING EXPECTATIONS TO DEVELOPMENTALLY APPROPRIATE PRACTICES

LEVEL: GENERAL

GOAL: **#1** Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: VALUE/ATTITUDE *(continued)*

OBJECTIVE: Participants will appreciate the importance of matching expectations to developmental milestones.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
3. Discuss inappropriate expectations and results.	3. Transparency/Handout (G-T6) *The Results of Inappropriate Expectations* Use the Transparency and the previous cases.	3. The outcome of this activity is that participants see the value of appropriate expectations. It is important that they see that the whole child must be considered when working with children with disabilities. All those who work with children must recognize the value of looking beyond the disability and seeing the importance of developmentally appropriate practices for growth and positive behavior.

THE RESULTS OF INAPPROPRIATE EXPECTATIONS

GOAL 2

Managing Behaviors

BEST COPY AVAILABLE

LEVEL: GENERAL

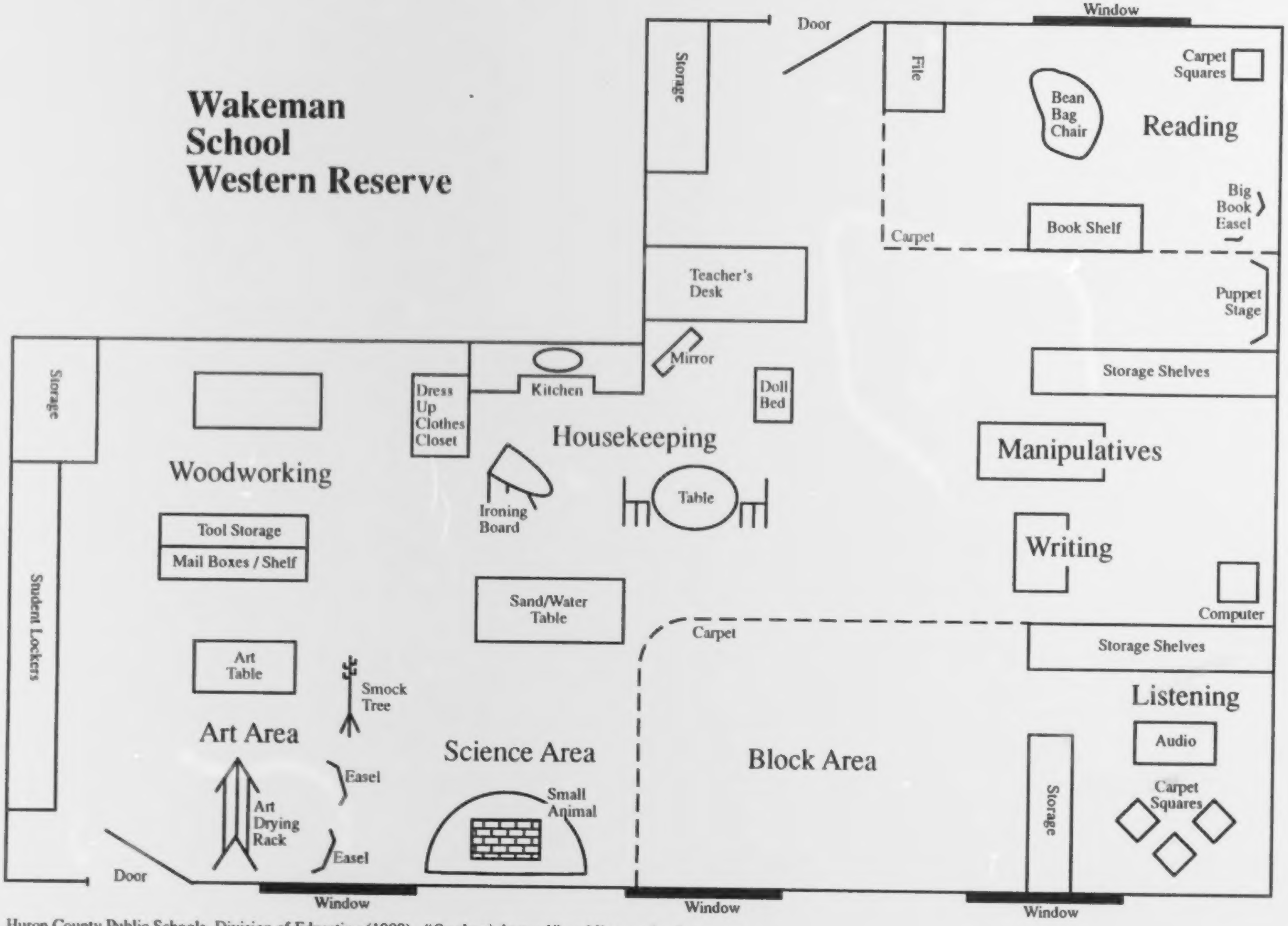
GOAL: #2 Gain competency in developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

COMPETENCY TYPE: KNOWLEDGE

OBJECTIVE: Participants will define developmentally appropriate preschool environments.

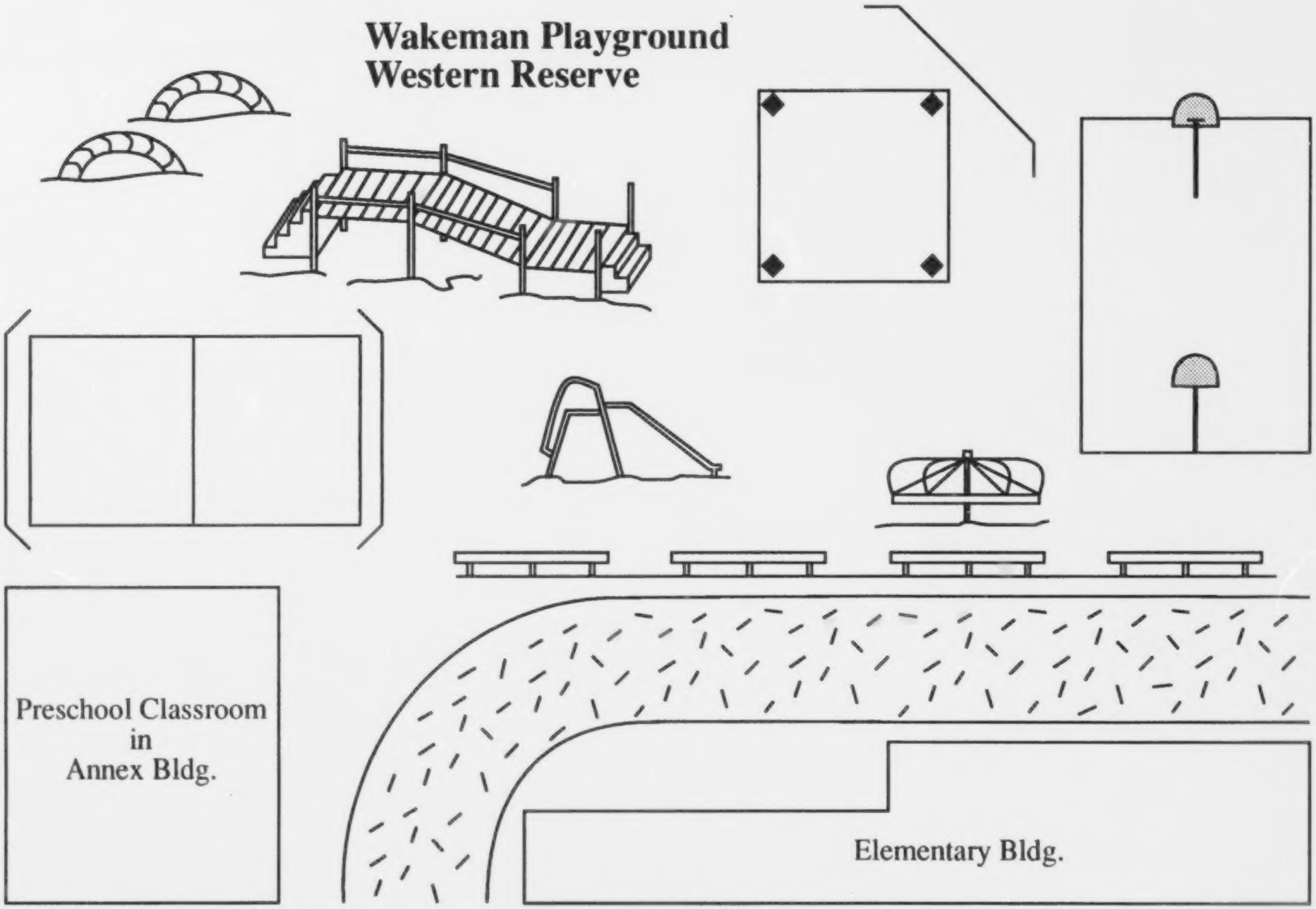
ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Review developmentally appropriate preschool behaviors.	1. Handout (G-H1) from Goal 1 U.S. Government Printing Office (1980). *Chart of normal development: Infancy to six years of age*	1. General overview of: – 3 year olds – 4 year olds Refer to the developmentally appropriate preschool behaviors from Goal 1.
2. Large group activity Discuss necessary components in terms of the facility, materials, supportive adults, growth and development, activities, and use of time and space.	2. Handout/Transparency (G-H7 and 8) *Wakeman School* (Huron County Public Schools) *Wakeman Playground* (Huron County Public Schools) Transparency (G-T7) *Classroom Areas for Developmental Skill Enhancement* Handout/Transparency (G-H9, G-T8) *Schedule* (Huron County Public Schools) Handout (G-H10, G-T9) Marion, M. (1991) *Characteristics of supportive adults*	2. Review and present an overview of: a. Floor plan b. Playground c. Areas for skill enhancement d. Schedule e. Supportive adults Discuss how the establishment of a developmentally appropriate environment can support the development of self-control in young children. Note how diversity among the children served by a program (e.g., ability, cultural, racial, religious, gender, etc.) need to be reflected in a program's set up.

Wakeman School Western Reserve


Storage
Door
Window
File
Carpet Squares
Bean Bag Chair
Reading
Big Book Easel
Carpet
Book Shelf
Teacher's Desk
Puppet Stage
Storage Shelves
Storage
Mirror
Kitchen
Doll Bed
Dress Up Clothes Closet
Woodworking
Housekeeping
Manipulatives
Ironing Board
Table
Tool Storage
Mail Boxes / Shelf
Student Lockers
Writing
Computer
Sand/Water Table
Carpet
Storage Shelves
Art Table
Smock Tree
Listening
Audio
Art Area
Science Area
Block Area
Storage
Easel
Art Drying Rack
Small Animal
Carpet Squares
Easel
Door
Window
Window
Window

Huron County Public Schools, Division of Education (1990) *"On the right track"* public preschool program.

Wakeman Playground
Western Reserve


Preschool Classroom
in
Annex Bldg.
Elementary Bldg.

Huron County Public Schools, Division of Education (1990) *"On the right track"* public preschool program.

G-T7

CLASSROOM AREAS FOR DEVELOPMENTAL SKILL ENHANCEMENT

HOUSEKEEPING AREA

MANIPULATIVE AREA

WATER AND SAND AREA

LARGE MUSCLE ACTIVITIES

READING/LANGUAGE ARTS AREA

BLOCK AREA

WOODWORKING AREA

SCIENCE AREA

ART AREA

CLASSROOM AREAS FOR DEVELOPMENTAL SKILL ENHANCEMENT

Learning activities and materials will be concrete, real, and relevant to the lives of young children. Learning will take place as young children touch, manipulate, and experiment with things and interact with people. Pictures and stories will frequently be used to build upon the child's real experiences with things and interaction with people.

Our classrooms consist of various different areas where developmental skills are enhanced.

Reading/Language Arts Area: Children use books, audio tapes, and games to help them understand the relationship between spoken and written language. Most importantly, children will enjoy both forms of language.

Block Area: Block play encourages children to use their imagination, requires cooperation with others, and helps develop eye-hand coordination. Blocks also help develop understanding of shapes, measurement, and balance.

Housekeeping Area: Children use creative thinking, develop skills in communicating and relating to others, using furniture, dress-up clothes, cooking and cleaning tools.

Manipulative Area: Children handle small puzzle pieces, beads, and sewing toys, developing fine motor skills and eye-hand coordination. Children also develop math skills by comparing sizes, colors, and shapes, and by grouping small manipulative items.

Woodworking Area: Children use soft wood, tools, and measuring instruments to develop large and small muscle control, problem solving, creative expression, cooperation, and respect for others.

Science Area: Children use magnets, weighing and measuring instruments, and magnifying glasses, to learn about the world around them. They observe, measure, classify, predict, experiment, and communicate their discoveries. Young children will begin to develop habits of problem solving and investigating — asking "Why?", and then finding out!

Art Area: Children use creativity here. They also develop fine muscle control and eye-hand coordination. They learn about color, line, shape and texture, using paints, crayons, paper, clay, paste, scissors, and markers. They also may feel more comfortable in expressing themselves through painting or drawing than with language.

Water and Sand Area: Children use water, rice, sand, corn meal, corn starch, measuring cups, mixers, sponges, funnels, and objects that sink or float, will learn math and science. They weigh and measure, and learn properties of materials. They use imaginative play and cooperate with others, while using small and large muscles in digging, hauling, pouring, and cleaning up.

Large Muscle Activities: Children will use the courtyard or outdoor area when weather permits, and otherwise the gym area for supervised activity. They will use balance beams, mats, tunnels, balls, and other materials, to develop physical skills such as pulling, pushing, riding, jumping, and running. Play during this time requires cooperation and following teacher direction. Many time numbers/counting and spatial concepts such as over/under, up/down, in/out, etc., are developed.

Huron County Public Schools (1990). *"On the right track" public preschool program.* Norwalk OH: Division of Education.

SCHEDULE

Daily schedule of developmentally appropriate activities for children including group and individual opportunities and quiet and active play.

9:15 - 10:00	Free choice activities Directed free play including: 1. Creative Art/Easel Painting 2. Sand/Water Play 3. Dramatic Play/Home Center 4. Writing Center 5. Manipulative Activities 6. Math Center 7. Reading Center 8. Science Center 9. Woodworking Center 10. Music Appreciation/Expression
10:00 - 10:20	**Activity Time** — in small groups or large groups with the teacher. Children alternate working with teacher and working at learning centers/play areas.
10:20 - 10:35	Restroom Break and Snack
10:35 - 10:55	Language Experiences/Development/Story Time
10:55 - 11:15	Large Muscle Activities in multi-purpose room or outdoors
11:15 - 11:25	Magic Circle to recall day's events, fingerplays, self-esteem builders, etc.
11:25 - 11:30	Prepare to go home

Huron County Public Schools (1990). *"On the right track" public preschool program.* Norwalk, OH: Division of Education.

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10:00 - 10:20	Activity Time
10:20 - 10:35	Restroom Break and Snack
10:35 - 10:55	Language Experiences
10:55 - 11:15	Large Motor Activities
11:15 - 11:25	Magic Circle
11:25 - 11:30	Prepare to go home

Huron County Public Schools (1990). *"On the right track" public preschool program.* Norwalk, OH: Division of Education.

CHARACTERISTICS OF SUPPORTIVE ADULTS

1. Understand child development.

2. See things from a child's perspective.

3. Pick up signals from the child.

4. Respond quickly and appropriately to child's signals.

5. Give clear expectations for desired behavior without imposing his own.

6. Manage and arrange physical and temporal environments to avoid many interruptions.

7. Set the mood for control to promote the child's willingness to accept control.

Adapted from: Marion, M. (1991). *Guidance of young children.* New York: MacMillan.

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3. Pick up signals from the child.
4. Respond quickly and appropriately to child's signals.
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7. Set the mood for control to promote the child's willingness to accept control.

LEVEL: GENERAL

GOAL: **#2** Gain competency in developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: Participants will define developmentally appropriate preschool environments.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
3. Large group activity Define developmentally appropriate preschool services: center-based services and itinerant services.	3. Transparency (G-T10) *Definitions of Developmentally Appropriate Preschool Environments* Handouts (G-H11 and 12) *Center-based Services* (Ohio Department of Education) *Itinerant Services* (Ohio Department of Education)	3. The leader may wish to encourage the participation of the group by asking questions to stimulate discussion using the Transparency prior to presentation of the Handouts.

DEFINITIONS OF DEVELOPMENTALLY APPROPRIATE PRESCHOOL ENVIRONMENTS

I. Center-based Services
   A. Shared classroom
   B. Enrollment of typical needs
   C. Mainstreaming
   D. Reverse mainstreaming
   E. Separate class

II. Itinerant Services
   A. Itinerant services
   B. Home environment

CENTER-BASED SERVICES

Center-based services are defined as classroom programs that provide group educational experiences to children of similar ages or developmental levels on a regularly scheduled basis and in a central location. The center-based model includes several possible methods of service delivery:

- **Shared Classroom.** In this arrangement one class for children with disabilities and one class for typically developing children share the same classroom space. Teachers "team plan and teach."
- **Enrollment of Typical Peers.** In this arrangement up to six age-eligible typically developing children are enrolled in a special class for the purpose of establishing an integrated class setting.
- **Mainstreaming.** In this arrangement children with disabilities are enrolled in a special class and also participate in planned activities that take place within preschool programs for typically developing children.
- **Reverse Mainstreaming.** In this arrangement children who are enrolled in programs for typically developing children participate in some of the activities that take place within the special class setting.
- **Separate Class.** In this arrangement children with disabilities are enrolled in a special class with no planned interaction with typically developing, age-mate children. In this case the nature and degree of disability that necessitates separate class placement must be well documented.

Ohio Department of Education, Division of Early Childhood. *Rules Implementation Monograph.* (Series 2, Draft 3/91).

ITINERANT SERVICES

Itinerant services are defined as services provided by preschool special education teachers or related services personnel which occur in the setting where the child or the child and parent(s) are located as opposed to providing services at a centralized location. The itinerant model includes two methods of service delivery:

- Services delivered in the home environment;
- Services delivered to children attending a preschool/kindergarten program for typically developing children.

Home environment is defined as the residence of the child and the child's parent(s). In addition to providing itinerant services to children attending a public school preschool or kindergarten program, services may also be provided to children attending a licensed community-based preschool/kindergarten where a qualified staff member is assigned to the child.

Ohio Department of Education, Division of Early Childhood. *Rules Implementation Monograph.* (Series 2, Draft 3/91).

LEVEL: GENERAL

GOAL: #2 Gain competency in developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: Participants will define developmentally appropriate preschool environments.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
4. Large group activity Present a checklist to evaluate a good learning environment for use when visiting a site.	4. Handout (G-H13) *A Checklist for Evaluating a Good Learning Environment for Young Children* (Ohio Department of Education)	4. Leader may wish to use portions of this checklist as an Transparency. This checklist is a tool a person may wish to use when evaluating preschools. This Handout contains a checklist for the following areas: a. Teacher-child relationships b. Program c. Materials and equipment d. Physical Environment e. Outdoor Learning Environment Discuss how the items listed might influence child behavior.

G-H13

A CHECKLIST FOR EVALUATING A GOOD LEARNING ENVIRONMENT FOR YOUNG CHILDREN

Teacher-Child Relationships	**Yes**	**No**
1. Do you serve as a guide, facilitator of learning, and resource person rather than as a dispenser of information?	____	____
2. Do you have respect for and trust children?	____	____
3. Do you offer suggestions in a positive, sincere manner?	____	____
4. Do you circulate among the children — encouraging them, asking them individual questions, and giving each child individual attention every day?	____	____
5. Do the children understand their responsibilities and are they encouraged to be independent?	____	____
6. Do you believe that children respond to genuine experience of trust with positive, productive, and enjoyable behavior and that they respond to lack of trust and confidence with destructive, hostile, and immature behavior?	____	____
7. Do you make sure that each child succeeds in something every day?	____	____
8. Do you operate in a manner that suggests that joy in learning, respect for others, and learning how to learn are more important than acquisition of specific subject information?	____	____
9. Are the children secure in what they know and not frightened by what they do not know?	____	____
10. Do you really listen to questions raised by children and do you answer them or seek to help individual children find the answer on the appropriate level?	____	____
11. Do you ask children questions that encourage them to develop logical thinking patterns?	____	____

Program		
1. Is the program organized to allow for individual differences in pace, style, and range of learning?	____	____
2. Are many opportunities provided for learning through the senses — feeling, hearing, tasting, smelling, seeing?	____	____
3. Are children free to select many of their own learning activities by using learning centers that are available to them?	____	____

4. Are the children encouraged to talk to each other, ask questions, and seek their own answers? ____ ____

5. Are there a variety of exciting first-hand experiences available for the children where they can make choices and produce on their own? ____ ____

6. Is an "integrated day" in operation? Are there no class lessons based on prescribed time allotments but rather a great variety of experiences available in the creative, intellectual, artistic, and physical areas? ____ ____

7. Are children learning from each other — by observing, imitating, and teaching one another? ____ ____

8. Are the children planning and evaluating their activities? ____ ____

9. Are children given freedom to learn by exploring, discovering, inquiring, and experimenting rather than by being given facts or direct answers to their questions? ____ ____

10. Are individual and small-group activities encouraged rather than total group instruction? ____ ____

Materials and Equipment

1. Is there a variety of materials, supplies, and equipment for children to work with that accommodates different ages, abilities, and interests? ____ ____

2. Are children encouraged to interact with or act upon their environment using many open-ended and self-corrective materials? ____ ____

3. Are children encouraged to supply some of their own materials so that their interests are appreciated and fully incorporated into the program? ____ ____

4. Are materials available that ensure development of both fine and gross motor skills? ____ ____

5. Are materials organized and do they have a definite place so that children know exactly where to find them and also can put them away immediately after use in the appropriate place? ____ ____

6. Are the children free to use the equipment by themselves and do they know how to care for it properly? ____ ____

7. Are informal, teacher-made and child-made materials encouraged and utilized as well as commercially made materials? ____ ____

8. Are materials and equipment safe and durable and are they used outdoors throughout the day just as appropriately as indoors? ____ ____

9. Are there many materials that are concrete and sensory and can be counted, arranged, and rearranged? Are these things that can be taken apart and put together again? ____ ____

Physical Environment

1. Are the classrooms decentralized or divided into a variety of learning centers rather than arranged in straight rows of desks or tables and chairs? ____ ____
2. Is the furniture arranged so that many large work surfaces are available? ____ ____
3. Is the classroom a beautiful place with a warm, inviting, home-like atmosphere? ____ ____
4. Is there a variety of learning centers, in areas such as language arts, math and science, art and music, homeliving, woodworking, sand and water, listening and viewing, creative corner, and a quiet area with a piece of colorful carpet and/or some pillows? ____ ____
5. Is there adequate space for active children to explore, create, and move about freely? ____ ____
6. Are there storage areas with an adequate place for each child to put his or her wraps, completed work and projects, and other possessions? ____ ____
7. Are the toilet and water facilities adequate and convenient for children? ____ ____
8. Are the rooms well heated, lighted, and ventilated? ____ ____
9. Is there provision for an easy flow of activities between outdoors and indoors and is the out-of-doors used throughout the day as a part of the total living-learning environment? ____ ____
10. Is the outdoor area adequate for free play, organized games, and quiet play? ____ ____
11. Is there a separation of noisy centers such as block building and homeliving from quiet areas such as reading and research? ____ ____
12. Are bulletin boards and displays in the room organized around the children's own handiwork? ____ ____

Outdoor Learning Environment

1. Is the outdoors utilized as part of the total living-learning environment in conjunction with the indoors as an extension of the classroom? ____ ____
2. Are the children free to move outside as a part of an integrated day? Are the experiences enriching rather than restricting? ____ ____
3. Is there an entrance into the school from the outside so that games, materials, and equipment can be moved in and out easily? ____ ____
4. Are open-ended materials available for children to use in their own creative ways (boxes, barrels, rubber tubes, wood strips, kegs with rubber tops for drums)? ____ ____

5. Is there a hard surface area that would be appropriate for block play, play with wheel toys, bouncing ball, and other activities? ____ ____

6. Is there a balance of sunny and shaded areas so that the children might choose either? ____ ____

7. Is there a grassy area that would provide a soft area for sitting together for a story, playing, or running? ____ ____

8. Is the outdoor environment safe-free from glass and sharp metal? ____ ____

9. Is there a mixture of homemade, inexpensive equipment (ropes, tires, telephone spools, sewer pipes, bean bags, newspaper ball, etc.) and commercial equipment (jungle gyms, wheeled toys, slides, and other stationary play equipment, climbing and reaching apparatus, rockers)? ____ ____

10. Is there a sandbox with buckets, shovels, various containers, water, blocks, measuring containers of various sizes, shapes, and toys so that math concepts and imaginative and dramatic play will be fostered? ____ ____

11. Is there an adequate woodworking table with appropriate tools (hammer, saws, nails, screwdrivers, plane, chisel, jigsaw, vise, drill, clamp, file, sandpaper, measuring sticks), a variety of sizes and shapes of wood pieces, and a sawhorse available for use by the children? ____ ____

12. Is there an area provided for water play with a variety of materials (boats, sponges, corks, funnels, rubber hoses, plastic containers for measuring, eggbeaters, liquid detergent, objects that sink and float) so that the children can explore, analyze, and discover some simple math and science concepts? ____ ____

13. Are easels available for outdoor painting and is there a roller table (or cart) for paints, brushes, and other art supplies that can be readily wheeled to the outdoor area for art? ____ ____

14. Is there an adequate area for block building outside (preferably a cement area), and is there a roller cart or bin for rolling blocks from the block center to the outside area? ____ ____

15. Is there evidence of growing things (vegetable gardens, flower gardens, potted plants) that have been planted and cared for by the children? ____ ____

16. Are there outdoor animals in cages or pens available for keeping as pets or for observation? ____ ____

17. Do the equipment and materials provided encourage children to do something based on their own ideas rather than just watch something operate? ____ ____

18. Are the equipment and space adequate for the development of motor skills and muscular coordination? ____ ____

19. Is the outdoor area accessible (in order to facilitate supervision and minimize the possibility of accidents — preferably large windows from floor to ceiling)? ____ ____

20. Are adequate equipment and space provided for dramatic play (tree house, fort, raised platforms, stripped-down car, rows of wooden crates, logs, trees, stumps, outdoor theater, little houses, or "in-and-out" places where the children can crawl through and climb in and out of)? ____ ____

21. Is there an outside storage area and is the equipment organized and stored so that children know where it is and where to put it away? ____ ____

22. Is there an outside covered area or roof so that activity can go on even on drizzly days? ____ ____

23. Are the children given the opportunity to work and play outside alone and in small groups and both quietly and actively? ____ ____

24. Is there a nature environment with trees, plants, and flowers so that the children can explore, discover, analyze, and learn about the science of plants and animals? ____ ____

25. Is there climbing equipment and apparatus to help develop large body muscles in the arms and legs? ____ ____

26. Are there balancing beams, logs, posts, or tree stumps so that the children can develop a sense of bodily balance? ____ ____

27. Is there sufficient and, if possible, sliding apparatus to help children develop a sense of motor direction? ____ ____

28. Are there interesting and challenging swings that can help develop children's arm and leg muscles, such as a "knotted rope swing" or a tire swing? ____ ____

29. Is there a slide or smooth pole that the children can climb up and slide down? ____ ____

30. Is there a diversity of equipment to provide for a variety of developmental levels among the children? ____ ____

Source: Ohio Department of Education.

LEVEL: GENERAL

GOAL: **#2** Gain competency in developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

COMPETENCY TYPE: SKILL

OBJECTIVE: Participants will be able to describe the components of a preschool environment that provide for children with disabilities and the needs of typically developing children.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large or small group activity Using the checklist provided (G-H13) summarize an appropriate environment in a variety of settings with reference to diversity (e.g., ability, cultural, racial, religious, gender, etc.)	1. Transparency/Handout (G-T11) *Appropriate Environment Worksheet*	1. The leader may wish to review portions of the checklist *before* Worksheet is passed out. Leader may wish to divide the group into groups of 3-4, or have them work individually. After 3-5 minutes, the leader may wish to write factors on the Transparency. Leaders may wish to refer to the play module.

G-T11

APPROPRIATE ENVIRONMENT WORKSHEET

Using the provided checklist, state needed factors for an appropriate environment for you or your child's personal setting.

TEACHER-CHILD RELATIONSHIPS

PROGRAM

MATERIALS AND EQUIPMENT

PHYSICAL ENVIRONMENT

OUTDOOR LEARNING ENVIRONMENT

LEVEL: GENERAL

GOAL: #2 Gain competency in developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

COMPETENCY TYPE: SKILL *(continued)*

OBJECTIVE: Participants will be able to describe the components of a preschool environment that provide for children with disabilities and the needs of typically developing children.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Prepare a list of equipment/materials from a home and their use.	2. Worksheet (G-W5) *Equipment/Materials From Home and Their Use Worksheet* Transparency (G-T12) *Equipment/Materials From Home and Their Use* (Schickendanz).	2. The leader may wish to use both as an Transparency and Handout or just a Handout as time allows. Remember to seek information relevant to cultural biases.

G-W5

EQUIPMENT/MATERIALS FROM HOME AND THEIR USE

List as many items from your home and how they could be used under the following categories.

DRAMATIC PLAY

LANGUAGE DEVELOPMENT AND LITERACY
Expressive and/or receptive language

COGNITIVE DEVELOPMENT

GROSS MOTOR

FINE MOTOR

EQUIPMENT/MATERIALS FROM HOME AND THEIR USE

DRAMATIC PLAY — Imaginary play with no set rules

Telephone book

Empty food, toiletry, and cleaning containers

Cookbook

Stationery and Envelopes

Magazines and Newspapers

Food Coupons and Store Ads

Maps and Atlas

Games that could be played:

House	Doctor's office
Grocery Store	Restaurant
Transportation	Post Office
Office	

Adapted from: Schickendanz, J.A. (1982). *More than the abc's: The early stages of reading & writing.* Washington: National Association for the Education of Young Children.

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LANGUAGE DEVELOPMENT AND LITERACY

Expressive and/or receptive language

Books

Cookbook

Empty food, toiletry, and cleaning containers

Magazines and Newspapers

Food Coupons and Store Ads

Maps and Atlas

Rice, flour, or cornmeal (could be used as sand or also for texture)

**Any talking to a child can be considered language learning.

Adapted from: Schickendanz, J.A. (1982). *More than the abc's: The early stages of reading & writing.* Washington: National Association for the Education of Young Children.

COGNITIVE DEVELOPMENT

Build with Blocks

Measure sand, water, or ingredients for cooking

Observe Changes in the Environment

Work with Wood and Tools

Sort Objects for a Purpose

Explore Animals, Plants, Water, Wheels, and Gears

Sing and Listen to Music from Various Cultures

Draw, Paint, and Work with Clay

(All of the cognitive development equipment/materials were taken from the book *Developmentally Appropriate Practice in Early Childhood Programs Serving Children From Birth Through Age 8, NAEYC).*

Adapted from: Schickendanz, J.A. (1982). *More than the abc's: The early stages of reading & writing.* Washington: National Association for the Education of Young Children.

GROSS MOTOR

Roller Skates

Big Wheels

Tricycles

Bicycles

Balls — catching, throwing, bouncing, or kicking

Swing Sets

Jump Rope

**Anything that involves the movement of arm and/or legs.

Adapted from: Schickendanz, J.A. (1982). *More than the abc's: The early stages of reading & writing.* Washington: National Association for the Education of Young Children.

FINE MOTOR

Scissors

Crayons

Paints

Any Type of Dough

Cookie Cutters

Markers

Blocks

Puzzles

**Anything the child needs to use their fingers or hands.

Adapted from: Schickendanz, J.A. (1982). *More than the abc's: The early stages of reading & writing.* Washington: National Association for the Education of Young Children.

LEVEL: GENERAL

GOAL: **#2** Gain competency in developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

COMPETENCY TYPE: SKILL *(continued)*

OBJECTIVE: Participants will be able to describe the components of a preschool environment that provide for children with disabilities and the needs of typically developing children.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
3. Describe the role of parents in setting the stage for success in either itinerant or special class setting. Include factors that can be controlled in an itinerant setting.	3. Worksheet (G-W6) *Role of Parents* Handout (G-H14) *Describing Role of Parent(s) in Setting the Stage for Success.* (Maker, Marion). Worksheet/Handout (G-W7) *Factors That Can Be Controlled in Itinerant Settings*	3. List five roles of parents. The leader may wish to use the Worksheet Handout as a Transparency to write down a few of the group's answers. The leader may wish to ask participants if they have any questions on the Handout. The leader may wish to encourage participants to add to the given list. Ask participants to consider how diversity issues (e.g., ability, cultural, racial, religious, gender, etc.) might influence the roles parents wish to assume. Please refer to *Working With Families* module for further development.

ROLE OF PARENTS

List at least five roles of parents in setting the stage for success.

1.

2.

3.

4.

5.

DESCRIBING THE ROLE OF PARENT(S) IN SETTING THE STAGE FOR SUCCESS

1. Be a supportive adult

2. Use appropriate processes to influence children
   a. Modeling
   b. Direct instruction/coaching
   c. Use of reinforcement and feedback
   d. Managing the child's environment
      - providing or not providing physical materials
      - time schedule
      - stated expectations of desired behaviors

3. Use positive methods of verbal control
   a. Suggestions
   b. Command when needed
   c. Short sentences and concrete words
   d. Child asked to restate what was said
   e. "No-choice" statements

4. Use appropriate nonverbal cues
   a. Touch of an arm
   b. Look directly at child without being threatening
   c. Point at area needing child's help
   d. Physically guide child to area
   e. Demonstrate "picking up"
   f. Point to area toys are to be put

5. Give clear and explicit information and instructions
   a. State all rules
   b. Give short instructions
   c. Give explicit instructions
   d. Tell child only what to do

Adapted from: Marion, M. (1991). *Guidance of young children.* New York: MacMillan. pp. 10-28.

6. Remain firm with rules and expectations

7. Work cooperatively with preschool teacher(s)

8. Show support in all age-appropriate and individually-appropriate actions and behaviors

9. Have an understanding of the difference between an abstract concept and a concrete concept
   a. The **concrete concept** is the first to develop in children. This concept is seen. Most people are able to agree on their properties or existence.
   b. The **abstract concept** is last to develop in children. This concept would include concepts which few people can agree on their meaning, such as love or hate.

Adapted from: Maker, C. J. (1982). *Curriculum development for the gifted.* Rockville MD: Aspen Systems. p. 19.

FACTORS THAT CAN BE CONTROLLED IN ITINERANT SETTINGS

1. Amount of lighting.
2. Extra noise and activity which may cause distractions.
3. Having a set area to work which is free of distracting materials (i.e. toys, foods, sibling's possessions, etc.).
4. Parents remain responsible for child's actions and behaviors while teacher is present. (If parents ignore previously punished behavior(s), they will send a mixed message to the child if the behavior is not punished while the teacher is present).
5.
6.
7.
8.

LEVEL: GENERAL

GOAL: #2 Gain competency in developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

COMPETENCY TYPE: VALUE/ATTITUDE

OBJECTIVE: Participants will be able to appreciate a variety of sound preschool environments.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Describe the difference between public preschool programs and day care programs.	1. Handout/Transparency (G-H15, G-T13) *A Description of the Difference Between A Public Preschool Program and a Day Care*	1. The leader may wish to encourage the participation of the participants by asking questions to stimulate discussion prior to presentation of the printed copy. 2. Refer to Ohio Revised Code 3301-31 or 3301-37 for additional clarity.

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A DESCRIPTION OF POSSIBLE DIFFERENCES BETWEEN A PUBLIC PRESCHOOL PROGRAM AND DAY CARE

Public Preschool Program	Day Care
1. *Center-based services* are usually 2-5 days a week for ½ day. *Itinerant services* are no less than four hours a month.	1. Day care services may be every day or parent selected days for varying amounts of time.
2. *Center-based services* focus on children age 3-5. *Itinerant services* focus on children age 3-5.	2. Day care providers may serve children of any age depending on their license.
3. In public school preschools there is generally no need for cots, mats, or any napping area.	3. Preschool-aged children may take naps so napping areas and equipment are needed.
4. The *center-based preschool* day is divided into developmentally appropriate small and large group activities, quiet and active play times.	4. The day care day is divided into small and large group activities, quiet and active play time.
5. The *center-based preschool* room is set up in small free play areas.	5. Play areas may serve a greater age range.

A DESCRIPTION OF POSSIBLE DIFFERENCES BETWEEN A PUBLIC PRESCHOOL PROGRAM AND DAY CARE

Public Preschool Program	Day Care
1. **Center-based services** 2½ hours **Itinerant services** 4 hours a month or more	1. Everyday or parent selected days for varying amounts of time.
2. **Center-based services** Age 3-5. **Itinerant services** Age 3-5.	2. Any age depending on license.
3. Generally no need for napping equipment or area.	3. Napping areas and equipment may be needed.
4. Day divided into developmentally appropriate groups and activities.	4. The day care day is divided into small and large group activities, quiet and active play time.
5. Room has small free play areas.	5. Play areas may serve greater age range.

LEVEL: GENERAL

GOAL: **#2** Gain competency in developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

COMPETENCY TYPE: VALUE/ATTITUDE *(continued)*

OBJECTIVE: Participants will be able to appreciate a variety of sound preschool environments.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Large or small group activity Given sample of various structures, will compare and contrast them to determine environmental appropriateness.	2. Handout (G-H16) *Hypothetical Preschools*	2. Reach a group consensus on selection. Discuss reasons for choice. Have the group determine the reasons for elimination of the other two samples and why they might bring about behavior problems in young children.

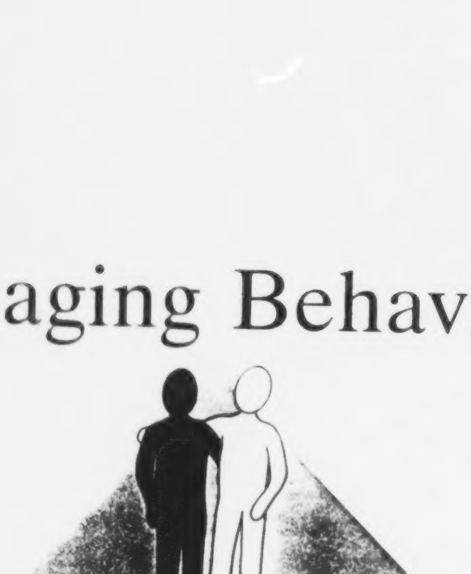
G-H16

HYPOTHETICAL PRESCHOOLS

	PRESCHOOL #1	PRESCHOOL #2	PRESCHOOL #3
Building	This preschool is in its own building in the community. It has a large field adjoining, but no playground.	This preschool is housed in a local high school with a daycare vocational training program and a playground.	This preschool is housed in a local elementary school in close proximity to kindergarten rooms and a playground area.
Outdoor Area	Large grassy areas used mainly for soccer and baseball.	Large sports playing fields and parking areas. Small enclosed area with trees and gardens and a sandbox, jungle gym, swing, tires, etc.	Large grassy areas with swings, jungle gym, monkey bars, and varying sizes of gymnastics equipment.
Room	Teacher's desk and individual desks in rows. Lots of cabinets and bookcases. Computer corner.	Teacher's desk and a variety of chairs, pillows, cushions, and pads. Den atmosphere in story corner. Lots of books and toys. Computer on the floor in the corner.	Teacher's desk and several tables and chairs. Lots of books, toys, and carpet squares. Computer on cart in corner.
Materials	Materials and toys are well organized and in cabinets.	Materials and toys are well organized and at activity tables.	Materials are in supply room. Toys are organized in bins.
Practices	Adults are distant and cold. They hurry children to complete their tasks.	Adults are supportive and help when needed. They plan for experiences to lessen children's fears.	Adults are supportive but distant and assume children will alleviate their own fears.
	Children are expected to attend quietly to lessons.	Children are encouraged to play and experiment in their own way.	Adults restrict children's play. Not talking … no running.

GOAL 3

Managing Behaviors



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LEVEL: GENERAL

GOAL: #3 Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: KNOWLEDGE

OBJECTIVE: A. Participants will understand the difference between preventative and reactive behavioral management approaches.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Participants will discuss the definition of self-control as it relates to preschoolers who are ages 3 through 5 years.	1. Handout (G-H17) *Self-Control*	1. Relate self-control definitions to the developmentally appropriate expectations of 3-5 year olds through discussion. If group has not worked with Goal 1, it may be necessary to distribute the Handouts on developmentally appropriate expectations from that section.

SELF-CONTROL

The act, power, or habit of having one's faculties or energies under control of the will.

Standard College Dictionary (1963). New York: Harcourt.

Self-control is voluntary and internal regulation of behavior.

Marion, M. (1987). *Guidance of Young Children.* New York: MacMillan.

LEVEL: GENERAL

GOAL: **#3** Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: A. Participants will understand the difference between preventative and reactive behavioral management approaches.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Participants will review and discuss Handout that describes the development of self-control in children from the NAEYC guidelines.	2. Handout/Transparency (G-H18) *Development of Self-Control in Children* NAEYC statement based on research from many sources.	2. Participants may be encouraged to order *Developmentally-appropriate practice in early childhood programs serving children from birth through age 8.* (Expanded Edition), from NAEYC, 1834 Connecticut Avenue, N.W., Washington, D.C. 20009-5786. It should be on every teacher's or child-care person's desk. Free information about NAEYC publications is available by calling 800-424-2460.

DEVELOPMENT OF SELF-CONTROL IN CHILDREN

"Adults facilitate the development of self-control in children when they recognize that children learn self-control when adults treat them with dignity and use discipline techniques such as:

1. Guiding children by setting clear, consistent, fair limits for classroom behavior; or in the case of older children, helping them set their own limits;
2. Valuing mistakes as learning opportunities;
3. Redirecting children to more acceptable behavior or activity;
4. Listening when children talk about their feelings and frustrations;
5. Guiding children to resolve conflicts and modeling skills that help children to solve their own problems; and
6. Patiently reminding children of rules and their rationale when needed."

Bredekamp, S. (Ed.) (1987). *Developmentally appropriate practice in early childhood programs serving children from birth through age 8.* Washington: NAEYC. pg. 11.

LEVEL: GENERAL

GOAL: #3 Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: A. Participants will understand the difference between preventative and reactive behavioral management approaches.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
3. Participants will discuss the definitions of preventative and reactive management techniques.	3. Handout/Transparency (G-H19, G-T14) *Preventative Approach to Managing Behavior* Definition sheet for preventative and reactive behavior techniques.	3. It is important to use these definitions to elicit discussion from the point of reference of the audience. School people will be able to relate them to situations at school; however, they can easily be related to home-based early childhood situations also.

PREVENTATIVE APPROACH TO MANAGING BEHAVIOR

To ensure success in the child's behavior, adults will set the stage for an environment that is child-centered, based on developmentally appropriate activities, expectations, and techniques, and organized to address positive discipline. The development of self-esteem, appropriate interactions with adults and peers, systematic interventions, and communication is essential in a preventative approach.

Positive Discipline: Any adult disciplinary practice that treats children with respect and dignity. It is a child-centered, unselfish approach, focusing on what a child needs and not so much on what an adult wants or needs.

Baltes, P. B. and Brim, O. G. (Eds.) (1982). *Lifespan development and behavior.* "Self-control and continuity from childhood to adolescence." (Vol. 4). New York: Academic Press.

REACTIVE APPROACH TO MANAGING BEHAVIOR

To attempt to manage behaviors after they occur instead of setting the stage for preventative techniques to be in place so that inappropriate behaviors will not occur.

PREVENTATIVE APPROACH TO MANAGING BEHAVIOR

To ensure success in the child's behavior, adults will set the stage for an environment that is child-centered, based on developmentally appropriate activities, expectations, and techniques, and organized to address positive discipline. The development of self-esteem, appropriate interactions with adults and peers, systematic interventions, and communication is essential in a preventative approach.

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Baltes, P. B. and Brim, O. G. (Eds.) (1982). *Lifespan development and behavior.* "Self-control and continuity from childhood to adolescence." (Vol 4). New York: Academic Press.

REACTIVE APPROACH TO MANAGING BEHAVIOR

To attempt to manage behaviors only after they occur instead of setting the stage for preventative techniques to be in place so as to minimize the occurrence of inappropriate behaviors.

LEVEL: GENERAL

GOAL: #3 Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: A. Participants will understand the difference between preventative and reactive behavioral management approaches.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
4. Participants will complete a yes/no response sheet that lists actions and asks if they are preventative or reactive as a management technique. These will include real-life situations as well as school situations.	4. Worksheets (G-W8) *Preventative Approach: Yes-No* See answer sheet.	4. It is important in this activity that participants recognize the planning required for preventative techniques to be in place for success. After participants have answered the response sheet, discuss each to reach consensus. Time may be given to describe why actions are preventative or reactive and the negative results of reactive management of behavior if needed.

PREVENTATIVE APPROACH: YES-NO

DIRECTIONS: After reading each of the following statements, answer yes or no to the following question:

Is this an example of a preventative approach to behavior management?

YES NO 1. Joe returns to the circle when the lights are flicked.

YES NO 2. "Maria, you should not have brought that toy to school today."

YES NO 3. Children come into the room, immediately put their belongings away and go to the circle.

YES NO 4. Children sit at their individual desks doing worksheets as an adult tells them to be quiet.

YES NO 5. "Can't you remember to tell your mother to send your shoes on the day we go to the gym?"

YES NO 6. Children are expected to share conversation as they work on a project at the table.

YES NO 7. There is a chart on the wall that lists with pictures the activities that are available for today.

YES NO 8. Two boys help each other put away the blocks when told that play time will be over in five minutes.

YES NO 9. The adult gives directions and expects the child to respond immediately.

YES NO 10. "Joshua, you finished cleaning your area quickly. Now you have time to look at the book."

YES NO 11. Suzy takes a toy from her friend. The adult makes them both return to the circle while other children continue to play.

YES NO 12. Children who misbehave are required to sit in a chair (time-out) for 30 minutes.

YES NO 13. The adult smiles and pats the girl on the arm when she completes a task.

G-W8

PREVENTATIVE APPROACH: YES-NO

DIRECTIONS: After reading each of the following statements, answer yes or no to the following question:

Is this an example of a preventative approach to behavior management?

[✓ YES] NO 1. Joe returns to the circle when the lights are flicked.

YES [✓ NO] 2. "Maria, you should not have brought that toy to school today."

[✓ YES] NO 3. Children come into the room, immediately put their belongings away and go to the circle.

YES [✓ NO] 4. Children sit at their individual desks doing worksheets as an adult tells them to be quiet.

YES [✓ NO] 5. "Can't you remember to tell your mother to send your shoes on the day we go to the gym?"

[✓ YES] NO 6. Children are expected to share conversation as they work on a project at the table.

[✓ YES] NO 7. There is a chart on the wall that lists with pictures the activities that are available for today.

[✓ YES] NO 8. Two boys help each other put away the blocks when told that play time will be over in five minutes.

YES [✓ NO] 9. The adult gives directions and expects the child to respond immediately.

[✓ YES] NO 10. "Joshua, you finished cleaning your area quickly. Now you have time to look at the book."

[✓ YES] NO 11. Suzy takes a toy from her friend. The adult makes them both return to the circle while other children continue to play.

YES [✓ NO] 12. Children who misbehave are required to sit in a chair (time-out) for 30 minutes.

[✓ YES] NO 13. The adult smiles and pats the girl on the arm when she completes a task.

LEVEL: GENERAL

GOAL: #3 Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: B. Participants will define preventative approaches to managing behavior and will describe how social competence, enhanced self-esteem, systematic interventions, and communication skills are addressed by the definition.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Participants will review together a Handout that defines each of the described preventative approaches to managing behavior.	1. Handout (G-H20) *Preventative Approaches to Managing Behavior for Self-Control*	1. Reference to the definition of preventative behavior techniques from the previous activity may be necessary.

PREVENTATIVE APPROACHES TO MANAGING BEHAVIOR FOR SELF-CONTROL

SOCIAL COMPETENCE

The ability of a child to interact in a socially acceptable manner that is developmentally appropriate.

ENHANCED SELF-ESTEEM

Self-esteem is the way one feels about one's self. Encouragement, based on a warm, positive relationship with adults that is given by any adult coming in contact with a child, will develop and strengthen self-esteem. Self-esteem development is facilitated by respecting, accepting, and comforting children regardless of the child's behavior.

SYSTEMATIC INTERVENTION

A strategy to teach and manage appropriate behaviors that is developmentally appropriate, professionally ethical, and planned in advance.

COMMUNICATION SKILLS

Receptive and expressive language skills that allow a child to respond across settings. For the child with a language disability, an alternate approach may be necessary. Adults encourage the development of language skills by speaking clearly and frequently and by listening actively. An understanding of a child's language skills facilitates management of behavior.

LEVEL: GENERAL

GOAL: **#3** Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: KNOWLEDGE*(continued)*

OBJECTIVE: B. Participants will define preventative approaches to managing behavior and will describe how social competence, enhanced self-esteem, systematic interventions, and communication skills are addressed by the definition.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Large group activity Participants will be given, for discussion purposes, a Handout with basic techniques for each of the approaches.	2. Handouts/Transparencies (G-H21 and 22, G-T15 and 16) *Social Competence* *Enhanced Self-Esteem* Handouts (G-H23 and 24) *Self-Esteem* *Way to Enhance the Growth of Self-Esteem* Handout/Transparency (G-H25, G-T17) *Systematic Interventions* Handout/Transparency (G-H26, G-T18) *Teach Children Socially Acceptable Ways of Getting What They Want* Handouts (G-H27 and 28) *How to Increase a Child's Ability to Make Friends* *Increase the Child's Ability to Function Successfully as Part of a Group* Transparency (G-T19) *Systematic Interventions* Handout/Transparency (G-H29, G-T20) *Basic Principles of Effective Management* Handout (G-H30) *Communication Skills*	2. These Handouts with basic information about techniques are not intended to be either exhaustive or enough information to initiate a program. Instead it is intended to give enough information for discussion or to focus on further study. While these are lengthy, they are not necessary for group discussion in their entirety, more for reference later. The reader should highlight specific points for discussion. Such Transparency are included, but others could be prepared prior to presentation. A separate Handout needs to be given to each participant for each of the techniques to be included in this activity.

SOCIAL COMPETENCE

Some techniques/principles that foster the development of social competence in the 3- through 5-year-old child are included in this Handout.

1. Adults support 3-year-olds' play and developing independence, helping when needed, but allowing them to do what they are capable of doing and what they want to do for themselves.

2. Adults recognize that, although 3-year-olds are usually more cooperative than toddlers and want to please adults, they may revert to toddler behavior (thumb-sucking, crying, hitting, baby talk) when they are feeling shy or upset, especially in new situations. Adults know that 3-year-olds' interest in babies, and especially their own recent infancy, is an opportunity for children to learn about themselves and human development.

3. Adults provide many opportunities for 3's to play by themselves, next to another child (parallel play), or with one or two other children. Adults recognize that 3-year-olds are not comfortable with much group participation. Adults read a story or play music with small groups and allow children to enter and leave the group at will.

4. Adults encourage children to take turns and share but do not always expect children to give up favored items.

5. Adults provide large amounts of uninterrupted time for children to persist at self-chosen tasks and activities and to practice and perfect their newly developed physical skills if they choose.

6. Adults know that preschoolers do not usually understand or remember the rules. Guidance reasons that are specific to a real situation and that are demonstrated repeatedly are more likely to impress young children.

7. Teachers facilitate the development of self-control in children by using positive guidance techniques such as modeling and encouraging expected behaviors, redirecting children to a more acceptable activity, and setting clear limits. Teacher's expectations match and respect children's developing capabilities.

8. Children are provided many opportunities to develop social skills such as cooperating, helping, negotiating, and talking with the person involved to solve interpersonal problems. Teachers facilitate the development of these positive social skills at all times.

9. Adults provide affection and support, comforting children when they cry and reassuring them when fearful. Adults plan experiences to alleviate children's fears.

From: *Developmentally Appropriate Practice in Early Childhood Programs Serving Children From Birth Through Age 8.* NAEYC 1987.

SOCIAL COMPETENCE

Some techniques/principles that foster the development of social competence in the 3- through 5-year-old child.

1. Adults allow children to do what they are capable of doing and what they want to do for themselves.
2. Adults know that 3-year-olds' interest in babies, and especially their own recent infancy, is an opportunity for children to learn about themselves and human development.
3. Adults provide many opportunities for 3's to play by themselves, next to another child (parallel play), or with one or two other children.
4. Adults encourage children to take turns and share but do not always expect children to give up favored items.
5. Adults provide large amounts of uninterrupted time for children to persist at self-chosen tasks and activities and to practice and perfect their newly developed physical skills if they choose.
6. Adults know that preschoolers do not usually understand or remember the rules. Guidance reasons that are specific to a real situation and that are demonstrated repeatedly are more likely to impress young children.

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9. Adults provide affection and support, comforting children when they cry and reassuring them when fearful. Adults plan experiences to alleviate children's fears.

ENHANCED SELF-ESTEEM

The process of developing an identity and self-image begins at birth. The security a baby feels through closeness and warmth with parents is the beginning of the growth of self-esteem. As a child grows and develops, the child's self-image comes from other people. It depends on feeling loved by parents and other adults in its life. When a child attends school, it is the teacher and other school staff who take the place of the parent for that portion of the day. If the child is to feel competent and develop positive self-esteem, the adults at school must assist the child to like himself and value his accomplishments. Research indicates that the success that children have in school is almost always dependent on high self-esteem and positive self-worth.

ENHANCING SELF-ESTEEM

- Communicate confidence in children — allow them to make mistakes.

- Arrange the environment for variety.

- Show affection.

- Allow children to show feelings.

SELF-ESTEEM

Ellie Kahn, a child therapist, lists the following ways to enhance self-esteem based on her work with children and families. The same methods apply to the school setting.

SHOW UNCONDITIONAL LOVE AND ACCEPTANCE

EXPRESS ANGER RESPONSIBLY

MAKE CLEAR REQUESTS

LEARN TO LISTEN

TAKE A CHILD'S FEELINGS SERIOUSLY

VALIDATE THE CHILD'S EXISTENCE

FIND SOMETHING TO APPRECIATE DAILY

SPEND TIME ALONE WITH A CHILD

ALLOW CHILDREN TO DO THINGS INDEPENDENTLY

RESPECT THE CHILD'S POSSESSIONS

ACKNOWLEDGE THE CHILD'S ABILITIES

RESPECT A CHILD'S CHOICES

TEACH CHILDREN THAT THEY ARE NOT ONLY THEIR BODY

EXPRESS LOVE NONVERBALLY

SPEAK TO A CHILD AT EYE LEVEL

AVOID MIXED MESSAGES

SHARE FEELINGS WITH A CHILD

FOCUS ON EACH CHILD'S UNIQUENESS

From: Kahn, E. (1990). "Strong Feelings of Self-Esteem Fuel a Child's Ability to Learn, to Love, and to Create." *Parents*. pp. 96-100.

G-H24

WAYS TO ENHANCE THE GROWTH OF SELF-ESTEEM

1. Base expectations on appropriate child development theory.
2. Communicate confidence in children by believing in them; say something encouraging or complimentary each day.
3. Allow children to make mistakes and tolerate their less than perfect efforts at new tasks or challenges.
4. Arrange the environment for children to be involved in a variety of activities and roles.
5. Reward behaviors that are to be continued; find positives in children's behavior to emphasize even when a behavior or task has not been totally successful.
6. Ignore errors that are minor or those which will change with developmental growth and experience.
7. Show affection through physical contact or closeness; tell children in words that you like them.
8. Praise in public, but reprimand in private.
9. Learn how to let every child feel special.
10. Allow children to have plateaus, set-backs, or regressions.
11. Gradually introduce children to new experiences to help prevent fears of failure.
12. Don't feel compelled to lecture or teach lessons at every opportunity.
13. Acknowledge what children are feeling; do not judge, blame, or criticize children for their feelings.
14. Avoid mixed messages.
15. Be honest when communicating.
16. Use "I" messages rather than "you" messages.
17. Be a good listener.
18. Do not make children feel small, unworthy, or inadequate.
19. Help children solve problems by themselves.
20. Treat each child fairly.
21. Avoid power struggles.
22. Model positive self-esteem.

SYSTEMATIC INTERVENTIONS

Some systematic intervention techniques/principles that foster the development of self-control in children aged three through five are included on this handout.

HELP CHILDREN LEARN TO RESTRAIN UNSOCIAL IMPULSES

- Short term methods of controlling behavior:
  1. Redirect the child to more positive behavior; remind the child of more positive behavior and the consequences for violating it.
  2. Remove the child from the activity calmly and promptly.
  3. Briefly discuss the child's feelings and the rules at that moment and at greater length at another time.
  4. Allow the child to determine when he is ready to return to the activity.
  5. Help the child return and be more successful in an acceptable way.
  6. When all else fails, take firmer action such as no chance to return to the activity involved or separation from another child.
  7. Comment favorably on regained self-control as soon as possible.
- Long term method for building inner controls:
  1. Analyze the reasons for repeated misbehavior and correct or prevent such conditions when possible.
  2. When such situations happen again and again, change the situation rather than nag the child.
  3. Take individual needs into account.
  4. Realize that children misbehave sometimes because of problems or crisis at home.
  5. Warn ahead.
  6. Tell children what they should do; that is, provide positive instructions instead of negative or neutral ones.
  7. Be alert to potential difficulties and step in before a problem occurs.
  8. Make a point of recognizing good behavior and commending it from time to time — catch the child being good.
  9. Convey a sense of warmth along with firmness.
  10. Be reasonable.
  11. Be a good example.
  12. Profit by experiences — both adult and child.

G-T17

SYSTEMATIC INTERVENTIONS

Help Children to Restrain Unsocial Impulses

REDIRECT

REMOVE

DISCUSS

WAIT

RETURN

SEPARATE IF NECESSARY

COMMENT ON REGAINED SELF-CONTROL

TEACH CHILDREN SOCIALLY ACCEPTABLE WAYS OF GETTING WHAT THEY WANT

1. Watch for the teachable moment.
2. Teach children how to ask for something that another child is using including how to wait until that child is done. Teach them what to do as they wait for their turn.
3. Teach children how to trade one item for another.
4. Teach children how to compromise and negotiate.
5. Teach children how to substitute.
6. Teach children how to play cooperatively through modeling.
7. Teach children how to verbalize alternatives.
8. Show approval when children use these alternative.
9. Help children respond generously.
10. Teach children how to stand up for their own rights.

From: Hendrick. (Citation, p. 119).

TEACH CHILDREN SOCIALLY ACCEPTABLE WAYS OF GETTING WHAT THEY WANT

- Teachable Moment
- Teach Children How to —
    - TRADE
    - COMPROMISE
    - SUBSTITUTE
    - PLAY COOPERATIVELY
    - VERBALIZE ALTERNATIVES
    - STAND UP FOR OWN RIGHTS

From: Hendrick. (Citation, p. 119).

HOW TO INCREASE A CHILD'S ABILITY TO MAKE FRIENDS

1. Recognize individual personalities of children.

2. Help children recognize the effect of inappropriate behaviors such as temper tantrums, taking other's possessions or toys, or physical outburst. Talk to them about the issue when they are calm.

3. Pair children for activities or experiences. Change pairings.

4. Look for common interests for matching children.

5. Help children cope with rejection.

From: Hendrick. (Citation, p. 119).

INCREASE THE CHILD'S ABILITY TO FUNCTION SUCCESSFULLY AS PART OF A GROUP

1. Use play situations to help children develop group social skills.
2. Know when to prolong or extend a situation that is positive.
3. Use mealtime or snack time to foster social competence
4. Use group time to foster social competence.

ENCOURAGE THE CHILDREN TO FIND SATISFACTION IN HELPING EACH OTHER AND THE GROUP

1. Children can provide comfort to others.
2. Older children can benefit from helping younger children.
3. Meaningful work offers opportunities for helping.

From: Hendrick, J. (1986). *Total Learning: Curriculum for the young child.* Columbus OH: Merrill.

G-T19

SYSTEMATIC INTERVENTIONS

- INCREASE A CHILD'S ABILITY TO MAKE FRIENDS
- INCREASE A CHILD'S ABILITY TO FUNCTION SUCCESSFULLY AS PART OF A GROUP
- ENCOURAGE CHILDREN TO FIND SATISFACTION IN HELPING EACH OTHER AND THE GROUP

G-H29

BASIC PRINCIPLES OF EFFECTIVE MANAGEMENT

1. Teachers need a workable management system in order to teach.
2. The goal of management is the cooperation of children in learning activities, not control over children.
3. Children who are engaged in meaningful learning activities are not likely to misbehave.
4. Children are likely to behave if they understand and accept the rules.
    - Decide on a few rules in the children's language
    - Teach the rules
        1. Clearly describe the rules including examples of the desired behavior.
        2. Precisely identify the situations to which the rules apply.
        3. Model the desired behavior and have the children model the behavior.
        4. Provide many opportunities to practice the desired behavior.
        5. Give consistent feedback on how the rules are being followed.
    - Change the rules when indicated.

ONCE THE RULES ARE IN PLACE:

1. Make lessons meaningful and developmentally appropriate.
2. Group children appropriately.
3. Get and keep children's attention when needed.
4. Signal transitions in advance; minimize waiting.
5. Establish routines; supervise all children systematically.
6. Project an image of confidence, firmness, and control with warmth.
7. Ignore minor misbehaviors and model desirable behaviors.
8. Recognize continued minor misbehaviors.
9. Respond to major misbehaviors.
10. Avoid punishment whenever possible.

Schickendanz, J., York, M., Stewart, I. S., & White, D. (1990). *Strategies for teaching young children.* Englewood Cliffs, NJ: . Prentice-Hall. pp. 61-80.

BASIC PRINCIPLES OF EFFECTIVE MANAGEMENT

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4. Provide many opportunities to practice the desired behavior.
5. Give consistent feedback on how the rules are being followed.

- Change the rules when indicated.

Schickendanz, J., York, M., Stewart, I. S., & White, D. (1990). *Strategies for teaching young children.* Englewood Cliffs, NJ: Prentice-Hall, pp. 61-80.

G-H30

COMMUNICATION SKILLS

Children acquire communication skills through hearing and using language, and as adults listen and respond to what children say. Three-year-olds need to have adults speak clearly and frequently. Adults need to respond quickly and appropriately to children's verbal initiatives. Talking may be more important than listening for them. Adults should patiently answer "why" questions. Opportunities should abound to expand children's language. Children should have many opportunities to communicate among themselves.

When focusing on managing behavior, the adult must informally evaluate a child's level of receptive and expressive language. Frequently a child needs concrete examples or pictures to gain self-control. Children with delays in communication skills must be provided with alternatives to verbal instruction. They must be helped to communicate their needs and feelings. Negative behaviors can occur as the result of children's inability to communicate with other children and adults.

LEVEL: GENERAL

GOAL: #3 Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: SKILL

OBJECTIVE: A. Participants will plan the use of each type of preventative approach.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large or small group activity Participants will decide how one would use each form of preventative behavioral management.	1. Worksheet (G-W9) *Techniques for use in Managing Behavior in a Preschool Setting*	1. Group should be given a few minutes to note specific personal selections; teams could work together. Information sheets used during the knowledge section of this training session should be used for reference. A discussion using the groups' experiences will lead participants toward some individual decision making. Ask participants to discuss how diversity (e.g., ability, cultural, racial, religious, gender, etc.) might influence one's choices.

TECHNIQUES FOR USE IN MANAGING BEHAVIOR IN A PRESCHOOL SETTING

LEVEL: GENERAL

GOAL: #3 Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: SKILL *(continued)*

OBJECTIVE: A. Participants will plan the use of each type of preventative approach.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Small group activity Given a typical preschool or child care situation, participants will relate what they could do differently using preventative techniques that lead toward the development of self-control and explain their choice.	2. Handout (G-H31) Transparency (G-T21) Worksheet (G-W10) *Situations for a Preventative Approach to Behavior Management* A note page is included to record group ideas.	2. The group can be divided into six different groups, given a few minutes to discuss and then report back to the whole group for dialogue. Each group should determine which one area, social competence, enhanced self-esteem, systematic interventions, or communication skills is in need of the most support and describe a solution. Note how diversity (e.g., ability, cultural, racial, religious, gender, etc.) might influence situations, if at all.

G-H31

SITUATIONS FOR A PREVENTATIVE APPROACH TO BEHAVIOR MANAGEMENT

1. Four children are playing in a table sandbox in the classroom. Other children are at various centers throughout the room. Randy starts throwing sand. Chlorisa starts crying. The other two children leave the table and run to the teacher. She starts toward the sandtable saying to Randy, "Why are you throwing sand again? I told you that you couldn't throw sand ever again. Stop it." "Chlorisa, don't cry. I know it isn't your fault. What shall we do about Randy?"

2. Children are sitting in a group on the floor talking about the events for the day. There is lots of participation. One little girl is not paying attention. Soon tears come. Her teacher tries to pull her into the activity by asking her a question which goes unanswered. After a few minutes, the teacher goes to her side and discovers that she has wet herself. The teacher asks her to go to the door to wait until she can take her to the office for dry clothes. With downcast eyes the child quietly goes to the door as all of the other children watch.

3. The teacher says, "Children, you have toys everywhere. It is time to clean up. Mrs. Good does not like a messy room. Pick up everything immediately." A few children begin to pick up, but most do not. They go to the work tables in the center of the room and begin their snacks. Mrs. Good watches the few children pick up toys and praises them for their cooperation. When they finally complete the task, they have only a few minutes to eat their snacks before time to go to the room for music.

4. Adria is crying. Ms. Best says to her from across the room, "Why are you crying again?" Adria says that no one will let her play in their group. Ms. Best says, "Don't cry. Maybe if you quit crying someone will want you to play." Adria does not stop crying. The others in the room do not ask her to join them.

5. Jona is very upset by the death of the class pet, a hamster named Joe. He does not want to join the group in a storytime. He just sits at the table. Miss Young tells him that he can't just sit there, he must join the group. He doesn't join the group.

6. The children are all sitting in the circle on the floor playing a classification game. Wei Li turns her back. Then she lays down and looks out the window. She starts singing. She stands up and says, "Look at the bird. It is building a nest." The teacher, Mr. Poor, says, "Wei Li, I told you that you could not shout out without permission. Since you can't remember the rules, you will have to go away from the circle. Sit back there on the floor and don't interrupt us again."

SITUATION FOR A PREVENTATIVE APPROACH TO BEHAVIOR MANAGEMENT

Four children are playing in a table sandbox in the classroom. Other children are at various centers throughout the room. Randy starts throwing sand. Chlorisa starts crying. The other two children leave the table and run to the teacher. She starts toward the sandtable saying to Randy, "Why are you throwing sand again? I told you that you couldn't throw sand ever again. Stop it." "Chlorisa, don't cry. I know it isn't your fault. What shall we do about Randy?" Randy has severe behavior problems while Chlorisa shows characteristics of autism.

Children are sitting in a group on the floor talking about the events for the day. There is lots of participation. One little girl is not paying attention. Soon tears come. Her teacher tries to pull her into the activity by asking her a question which goes unanswered. After a few minutes, the teacher goes to her side and discovers that she has wet herself. The teacher asks her to go to the door to wait until she can take her to the office for dry clothes. With downcast eyes the child quietly goes to the door as all of the other children watch. The little girl wears diapers and has never before shown any sense of being wet.

The teacher says, “Children, you have toys everywhere. It is time to clean up. Mrs. Good does not like a messy room. Pick up everything immediately.” A few children begin to pick up, but most do not. They go to the work tables in the center of the room and begin their snacks. Mrs. Good watches the few children pick up toys and praises them for their cooperation. When they finally complete the task, they have only a few minutes to eat their snacks before time to go to the room for music. All children seem to be developing average or above cognitive and communication skills; however, they have weak interpersonal relationship skills.

Adria is crying. Ms. Best says to her from across the room, “Why are you crying again?” Adria says that no one will let her play in their group. Ms. Best says, “Don’t cry. Maybe if you quit crying someone will want you to play.” Adria does not stop crying. The others in the room do not ask her to join them. Adria has average to above cognition with a significant hearing loss.

Jona is very upset by the death of the class pet, a hamster named Joe. He does not want to join the group in a storytime. He just sits at the table. Miss Young tells him that he can’t just sit there, he must join the group. He doesn’t join the group. Jona seems to be experiencing an attention deficit disorder.

The children are all sitting in the circle on the floor playing a classification game. Wei Li turns her back. Then she lays down and looks out the window. She starts singing. She stands up and says, "Look at the bird. It is building a nest." The teacher, Mr. Poor, says, "Wei Li, I told you that you could not shout out without permission. Since you can't remember the rules, you will have to go away from the circle. Sit back there on the floor and don't interrupt us again." Wei Li is 3 and has had very limited exposure to structure in her environment.

SITUATIONS FOR A PREVENTATIVE APPROACH TO BEHAVIOR MANAGEMENT

LEVEL: GENERAL

GOAL: #3 Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: SKILL *(continued)*

OBJECTIVE: A. Participants will plan the use of each type of preventative approach.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
3. Small group activity Participants will decide how and when to combine techniques and when not to combine them through discussion of the above situations.	3. Worksheet (G-W11) *Combination of Techniques*	3. Using the same situations from above, participants will complete a worksheet for indicating when more than one technique is useful, but also when more than one becomes cumbersome. Each situation can be given to a different group. Time should be given for discussion of combinations of preventative techniques. In some cases it is important to not attempt to try several techniques. These should be discussed; there may be disagreement. It is important to continue to stress that interventions, when needed, should be immediate, brief, and consistent.

COMBINATION OF TECHNIQUES

LEVEL: GENERAL

GOAL: #3 Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: SKILL *(continued)*

OBJECTIVE: A. Participants will plan the use of each type of preventative approach.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
4. Participants will determine if all of the presented styles of managing behavior are appropriate to all children.	4. Worksheet (G-W12) *Are These Styles of Managing Behavior Appropriate?*	4. Using a worksheet with a grid, decide if all styles are appropriate to specific situations. A brief discussion leads into the next objective and may not need to be more than a show of hands as to agreement or disagreement.

G-W12

ARE THESE STYLES OF MANAGING BEHAVIOR APPROPRIATE?

Circle Yes or No for each

	Social Competence	Enhanced Self-Esteem	Systematic Intervention	Communication
3-year-old child with spina bifida (non-ambulatory)	Yes No	Yes No	Yes No	Yes No
5-year-old child with non compliant behaviors	Yes No	Yes No	Yes No	Yes No
4-year-old child with receptive, but no expressive language	Yes No	Yes No	Yes No	Yes No
5-year-old child with severe hearing loss, but average or above cognition	Yes No	Yes No	Yes No	Yes No
3-year-old child with uncontrolled self-injurious behaviors	Yes No	Yes No	Yes No	Yes No
4-year-old child with manipulative behaviors	Yes No	Yes No	Yes No	Yes No

LEVEL: GENERAL

GOAL: #3 Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: SKILL *(continued)*

OBJECTIVE: B. Participants will apply modifications that might be made for children with disabilities.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Participants will plan the use of each type of preventative approach for children with disabilities.	1. Handout (G-H31) (from previous section) *Situations for a Preventative Approach to Behavior Management* Transparency (G-T21) (from previous section) *Situation for a Preventative Approach to Behavior Management*	1. Using the same situations as before, but with the addition of a specific disability or combination to each situation, decide as a group the modifications needed. Additional opportunities exist with other disabilities added to the existing situations, if time permits. A sensitivity activity could be substituted here. Participants could assume various disabilities and try to participate in a preschool group circle time.

LEVEL: GENERAL

GOAL: #3 Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: VALUE/ATTITUDE

OBJECTIVE: Participants will value preventative approaches to managing behavior.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Given examples of use of a reactive management of behavior, the participants will describe how a preventative approach could have been better, telling which one and why.	1. Handout (G-H32) *Reactive Techniques* Worksheet (G-W13) *Preventative Methods that Could Help*	1. Have participants review considerations for effective management techniques for the preschool child in the situations described. They may use the Worksheet to record responses. A Transparency can be made of the worksheets and used to record response with the group also. It is important to elicit a sense of the value of the preventative approach vs. the reactive approach in this activity. The culmination of this component of the module will provide the participant with the information necessary to establish a child-centered management belief system.

REACTIVE TECHNIQUES

1. A four-year-old child is told to play trucks with two friends. The children are not playing together; sharing is not occurring. The teacher goes to them and explains that "friends share." She then says that if they can't share, then none of them can play. They must leave the play center and sit at the table until free time is over.

2. A four-year-old is told that he must be quiet and listen to the teacher as she explains about what you see at a circus. The child wants to ask a question. The teacher tells him that if he listens, he will probably hear the answer. He crawls to the back of the group and appears to be off-task. The teacher says that he will not earn a smiley face for the day.

3. A preschool child is scolded for not remembering and applying the rules of the classroom which are posted on the wall. The rules have been taught. There are seven rules. When the child repeats the rule-breaking behavior, the teacher says, "Maybe you shouldn't be in preschool since you can't remember even the simplest rules."

G-W13

PREVENTATIVE METHODS THAT COULD HELP

A BETTER METHOD	WHY WOULD THIS BE BETTER?
1.	
2.	
3.	

GOAL 4

Managing Behaviors

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LEVEL: GENERAL

GOAL: **#4** Gain competency in knowing when and how to seek additional resources for managing behaviors that are beyond the scope of the school setting for individual child needs.

COMPETENCY TYPE: KNOWLEDGE

OBJECTIVE: Participants will know resources that may or may not be beyond the scope of the public school that could assist with some preschool children's behavioral needs.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Participants will discuss a Handout listing resources within the school and how the determination of need could be made. This is to include related services as they apply.	1. Handout (G-H33 and 34) *How Determination of Need is Made Within the School.* Rules for the Education of Preschool Children with Disabilities (Ch. 3301.31). *List of Services Within the School.*	1. After the discussion of the determination of need, ask the participants to review the list of services to identify any missing services. Discuss how this information relates to children who potentially have behavior problems. It is also critical to discuss steps that can be taken on an informal basis to gain assistance for working with a difficult child when preventative methods are not successful. These might include: – speaking to other teachers for ideas – systematically charting behavior – seeking support from the school psychologists, etc. Leader may wish to obtain the books *Rules for the Education of Preschool Children with Disabilities* and *Rules for the Education of Handicapped Children* (Blue book) for their own reference.

G-H33

HOW DETERMINATION OF NEED IS MADE WITHIN THE SCHOOL

To determination of need in the case of a suspected disability, a multifactored and multidisciplinary evaluation shall be conducted as follows:

A. The use of all of the following assessment procedures to confirm a documented deficit as required of this rule
  1. Structured interview with persons knowledgeable about the child's functioning including the parent or primary caregiver
  2. Structured observations over multiple settings and activities
  3. Standardized norm-referenced tests (where published)
  4. Criterion-referenced/curriculum-based assessment

B. Assessments in the following areas:
  1. Adaptive behavior
  2. Background information including developmental, family, medical, and educational histories when appropriate
  3. Cognitive ability
  4. Communication skills
  5. Hearing
  6. Preacademic skills
  7. Sensorimotor functioning
  8. Social-emotional/behavioral functioning
  9. Vision

C. The following specialized evaluations:
  1. Physical examination in cases where the disability is primarily the result of a congenital or acquired physical disability
  2. Visual examination where the disability is primarily the result of a visual impairment
  3. Audiological examination in cases where the disability is primarily the result of a hearing impairment

D. Each child shall be determined eligible when one of the following applies:
  1. There is a documented deficit in one or more of the following areas:
    a. Communication skills (form, content, and use of language)
    b. Hearing abilities
    c. Motor functioning
    d. Social-emotional/behavioral functioning
    e. Vision abilities; or
  2. There is a documented deficit in cognitive ability as determined through a measure of cognitive functioning administered by a licensed psychologist or certificated school psychologist, and also a documented deficit in
    a. One or more of the areas listed above, or
    b. A documented deficit in adaptive behavior; or
  3. There is a documented deficit in adaptive behavior and a documented deficit in one or more of the areas listed above

Source: Ohio Rules for the Education of Preschool Children with Disabilities.

LIST OF SERVICES WITHIN THE SCHOOL

Once a child has met the eligibility of special program, the following list of services may be obtained through the school.

A. Itinerant Services

B. Special Class

C. Related Services

  1. Attendant services for preschool children with disabilities who have a documented deficit in motor functioning and/or a congenital or acquired physical disability
  2. Audiological services for preschool children who have a documented deficit in hearing abilities and who are served in preschool special education units
  3. Interpreter services for preschool children who have a documented deficit in hearing abilities
  4. Occupational therapy services
  5. Orientation and mobility services for preschool children who have a documented deficit in vision abilities
  6. Physical therapy services
  7. School psychological services
  8. Speech and language services

LEVEL: GENERAL

GOAL: #4 Gain competency in knowing when and how to seek additional resources for managing behaviors that are beyond the scope of the school setting for individual child needs.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: Participants will know resources that may or may not be beyond the scope of the public school that could assist with some preschool children's behavioral needs.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Large group activity Leader will be given a blank list of other types of services that may or may not be outside of the school setting and will complete a basic networking list of local resources.	2. Transparency (G-T22) *Services Outside of the School* Handout (G-H35) *Possible Agencies* Handout (G-H36) *Ohio Rehabilitation Services Commission for Ohioans*	2. Begin by reviewing the Transparency. Ask participants to identify how specific service providers might be able to assist with behavioral issues (e.g., speech/language therapist could assist if child's behavior problem stems from an inability to communicate). The leader may wish to review a list of services with a basic network of local resources he/she has provided and/or hand a blank worksheet to participants for future references. The local SERRC Center will have flyers and brochures available for use and distribution. The leader may wish to obtain the following catalog: *Ohio Rehabilitation Services Commission for Ohioans.* (#G-46) 400 E. Campus View Blvd., Columbus, OH 43235-4604, 1-800-282-4536. The best network available is the audience. Ask them to provide contacts from their experience.

SERVICES THAT MAY OR MAY NOT BE OUTSIDE THE SCHOOL

Adapted Physical Education Services

Attendant Services

Audiological Services

Counselling (Individual or Family)

Extension Services

Guide Services

Interpreter Services

Medical Services

Occupational Therapy Services

Orientation and Mobility Services

Physical Therapy Services

Psychological Services

Speech and Language Services

POSSIBLE AGENCIES OR RESOURCES

American Red Cross
County Association for Retarded Citizens
County Children Services Board

County Department of Human Services
County Board of Education
County Board of MR/DD

County Health Department
Easter Seals
Head Start

Hospitals
Mental Health Board
Montessori

OACCA Helping Ohio's Troubled Children
Ohio Coalition for the Education of Handicapped Children
Ohio Rehabilitation Services Commission

Ohio Resource Center for Low Incidence and Severely Handicapped
School Psychological Services
SERRC (Special Education Regional Resource Center)

YMCA

OHIO REHABILITATION SERVICES COMMISSION FOR OHIOANS

A Directory of Local, State and National Organizations and Agencies Interested in People with Disabilities

Revised 2/91 Catalog #G-46

• consumer groups • public agencies • voluntary organizations • advocacy organizations • professional organizations • consumer groups • public agencies • voluntary organizations • advocacy organizations • professional organizations • consumer groups • public agencies • voluntary organizations • advocacy organizations • professional organizations • consumer groups • public agencies • voluntary organizations • advocacy organizations • professional organizations • consumer groups • public agencies • voluntary organizations • advocacy organizations • professional organizations • consumer groups • public agencies • voluntary

LEVEL: GENERAL

GOAL: **#4** Gain competency in knowing when and how to seek additional resources for managing behaviors that are beyond the scope of the school setting for individual child needs.

COMPETENCY TYPE: SKILL

OBJECTIVE: Participants will select appropriate resources for specific situations and describe when they might be needed.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Small group activity Given a situation, participants will decide what school resources could be used, what outside resources could be used, and how to determine when to use either or both.	1. Handout/Transparency (G-H37) *Toya and Jose* Worksheet/Transparency (G-W14) *Recommendations* provided for individual note taking.	1. One or both of these can be used. The group could be divided in half and given time to present ideas. A participant might have a situation to share with the group from their own experience — past or present. If it can be briefly described, it could be a better example for the activity. Discuss ways to use both resources effectively to benefit the child. Discuss how issues of diversity (e.g., ability, cultural, racial, religious, gender, etc.) might affect these situations.

TOYA

Toya, aged five, has average ability as demonstrated on various cognitive instruments. she was neglected at birth according to the Children Service case worker. She was removed from the home at age two. She is in temporary foster placement currently. Foster parents report that she needs a great deal of love. She will not play with her foster siblings or her classmates in the regular kindergarten class. She seems to be absorbing readiness skills and will respond to questions appropriately. She will not complete tasks given to her by the teacher even when they involve manipulatives. Instead, she sits in a chair and stares at the other children or plays by herself with the dolls. If another child comes to the housekeeping center, she puts the doll away and leaves.

JOSE

Jose is four years old. He lives in a single parent home with his mother; he does not see his father anymore because of a move. He does go to maternal grandparents during the day when not in his integrated preschool setting. Mother is gone from 6:30 a.m. until 6:00 p.m. Jose is developing very slowly compared to typical peers. His delayed cognitive skills are also affected by lack of speech. While it is recognized that he speaks while with grandparents, he does not use expressive language with his mother or at school. The school is using speech and sign with him. Mother does not know sign. Grandparents are very resistant to sign and are encouraging mother to demand its elimination. Jose is generally well-behaved, but does not interact with peers or teachers. He occasionally shows striking out behaviors while at school. This has not been noted at home.

G-W14

RECOMMENDATIONS

TOYA:
Resources (school)

Resources (out of school)

JOSE:
Resources (school)

Resources (out of school)

LEVEL: GENERAL

GOAL: **#4** Gain competency in knowing when and how to seek additional resources for managing behaviors that are beyond the scope of the school setting for individual child needs.

COMPETENCY TYPE: VALUE/ATTITUDE

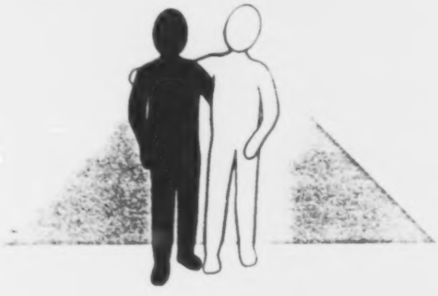
OBJECTIVE: Participants will respect the limitations of the public school personnel and their need for additional information or assistance.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large or small group activity Participants will brainstorm situations when school personnel cannot provide for all needs and evaluate why it might be better to seek outside assistance.	1. Worksheet/Transparency (G-W15) *Brainstorming situations*	1. The leader may wish to have the group divided into small groups. Let groups brainstorm for 5-7 minutes, then ask participants to share situations as a whole group and discuss why it might be better to seek outside assistance. Leader may wish to use Worksheet as a Transparency to write down facts of the situations.

BRAINSTORM SITUATIONS

Brainstorm situations when school personnel cannot provide all needs and evaluate why it might be better to seek outside assistance.

Managing Behaviors



GOAL 5

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LEVEL: GENERAL

GOAL: #5 Develop an understanding of a philosophy which provides for the development of self-control that can be used to conceptualize a developmentally-appropriate environment and behavior plan for either center-based or itinerant-based preschool learning for all children, those who are typically developing and those with disabilities.

COMPETENCY TYPE: KNOWLEDGE

OBJECTIVE: Participants will select appropriate preschool settings that are child-focused in terms of managing behavior.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Participants will review knowledge from each of the previous general competencies: developmental levels, appropriate environments, preventative behavioral management methods that promote self-control, and use of outside agencies.	1. Transparency (G-T23) *Discussion Guide for Review*	1. The leader may wish to encourage the participation of the participants by asking questions to stimulate discussion prior to presentation of the printed copy.

G-T23

DISCUSSION GUIDE FOR REVIEW

DEVELOPMENTAL LEVELS:

APPROPRIATE ENVIRONMENT:

POSITIVE APPROACHES:

ADDITIONAL RESOURCES:

LEVEL: GENERAL

GOAL: #5 Develop an understanding of a philosophy which provides for the development of self-control that can be used to conceptualize a developmentally-appropriate environment and behavior plan for either center-based or itinerant-based preschool learning for all children, those who are typically developing and those with disabilities.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: Participants will select appropriate preschool settings that are child-focused in terms of managing behavior.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Large or small group activity Given three descriptions of preschools, participants will select one that is most child-centered in terms of developing appropriate self-management based on appropriate expectations and integrates cultural diversity.	2. Handout (G-H38) *Hypothetical Preschools* Transparency (G-T24) *Aspects of Child-Centered Preschool* **Supplemental Resources** *Developmentally appropriate practice in early childhood programs serving children from birth through age 8* by NAEYC, 1990.	2. Given the group and time, the leader may wish to have the group determine the reasons for elimination of the other two samples. The group may want to make suggestions as to what needs to be changed about the two samples.

HYPOTHETICAL PRESCHOOLS

	PRESCHOOL #1	PRESCHOOL #2	PRESCHOOL #3
Building	This preschool is in its own building in the community. It has a large field adjoining, but no playground.	This preschool is housed in a local high school with a daycare vocational training program and a playground.	This preschool is housed in a local elementary school in close proximity to kindergarten rooms and a playground area.
Outdoor Area	Large grassy areas used mainly for soccer and baseball.	Large sports playing fields and parking areas. Small enclosed area with trees and gardens and a sandbox, jungle gym, swing, tires, etc.	Large grassy areas with swings, jungle gym, monkey bars, and varying sizes of gymnastics equipment.
Room	Teacher's desk and individual desks in rows. Lots of cabinets and bookcases. Computer corner.	Teacher's desk and a variety of chairs, pillows, cushions, and pads. Den atmosphere in story corner. Lots of books and toys. Computer on the floor in the corner.	Teacher's desk and several tables and chairs. Lots of books, toys, and carpet squares. Computer on cart in corner.
Materials	Materials and toys are well organized and in cabinets.	Materials and toys are well organized and at activity tables.	Materials are in supply room. Toys are organized in bins.
Practices	Adults are distant and cold. They hurry children to complete their tasks.	Adults are supportive and help when needed. They plan for experiences to lessen children's fears.	Adults are supportive but distant and assume children will alleviate their own fears.
	Children are expected to attend quietly to lessons.	Children are encouraged to play and experiment in their own way.	Adults restrict children's play. Not talking ... no running.

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ASPECTS OF CHILD-CENTERED PRESCHOOL

BUILDING:

SPACE (OUTDOOR/INDOOR):

MATERIALS:

ADULTS:

OTHER:

LEVEL: GENERAL

GOAL: **#5** Develop an understanding of a philosophy which provides for the development of self-control that can be used to conceptualize a developmentally-appropriate environment and behavior plan for either center-based or itinerant-based preschool learning for all children, those who are typically developing and those with disabilities.

COMPETENCY TYPE: SKILL

OBJECTIVE: Participants will describe the information necessary to select a preschool that is child-focused and fosters success for all children.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large or small group activity Participants will make a checklist of observable conditions for use when selecting a preschool setting that supports the development of self-control in young children.	1. Worksheet/Transparency (G-W16, G-T25) *Checklist of Observable Conditions for Selecting a Preschool* **Supplemental Resources** Johnston, L. G., Rogers, C. K., Johnson, P. A. and NCO/SERRC. *Early childhood special education program evaluation (EC-SPEED) manual* McDonnel, A. and Hardman, M. (1988). *Journal of the Division for Early Childhood.* Ohio Department of Education, Division of Educational Services. *Preschool Guidelines.* Harms, T. (1971). *Young children,* "Evaluating settings for learning."	1. Give participants a blank outline for development. Transparencies with selected conditions may then be presented for discussion purposes which should include cultural needs. During this presentation it is important for the participants to make their own checklist as it is assumed that some of this population may be in the position to be looking for a preschool for a child.

G-W16

CHECKLIST OF OBSERVABLE CONDITIONS FOR SELECTING A PRESCHOOL

BUILDING:

SPACE:

MATERIALS:

ADULTS:

OTHER:

CHECKLIST OF OBSERVABLE CONDITIONS FOR SELECTING A PRESCHOOL

Before reviewing other observable conditions, determine if the preschool has a written philosophy.

BUILDING:

1. Are early childhood services provided in a supported placement?
2. Is there systematic integrated contact with typically developing peers?
3. Can both quiet and noisy activities take place simultaneously without interference?

SPACE:

1. Are furnishings arranged for freedom of use by children?
2. Is space provided so children can learn without being forced to play in a group?
3. Is space provided for age-appropriate activities both indoors and outdoors
4. Do children feel in control of their environment?

MATERIALS:

1. Are materials age-appropriate?
2. Are materials available for free access by children without adult assistance?
3. Are materials adaptable and emphasize function rather than the form of response?
4. Are materials geared toward the individual child, family peers, and community?

ADULTS:

1. Are adults supportive while nurturing mutual respect?
2. Are children guided and assisted to grow rather than being "cared for" by adults?
3. Are parents full partners in planning and decision-making?
4. Do adults allow the children to establish self- initiated responding?

OTHER:

1. Is sensitivity to diversity (e.g., ability, cultural, racial, religious, gender, etc.) required?
2. Are outcomes measured?
3. Is transition being planned for?

LEVEL: GENERAL

GOAL: #5 Develop an understanding of a philosophy which provides for the development of self-control that can be used to conceptualize a developmentally appropriate environment and behavior plan for either center-based or itinerant-based preschool learning for all children, those who are typically developing and those with disabilities.

COMPETENCY TYPE: SKILL *(continued)*

OBJECTIVE: Participants will describe the information necessary to select a preschool that is child-focused and fosters success for all children.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Large or small group activity Participants will develop a list of questions to ask when investigating preschool selection in regard to development of self-control issues.	2. Worksheet (G-W17) *Preschool Selection Questions*	2. Ask participants to generate their own questions before sharing printed materials. Contact local SERRC and Early Intervention Collaboratives for information about selection of a preschool for a child. The purpose of this activity is not to be critical of local agencies/schools, but to give participants the skill to make selections based on sound principals. Additional resources available through other agencies in the area could be distributed during this activity.

PRESCHOOL SELECTION QUESTIONS

INSTRUCTIONS: On your own, please develop three questions under each heading that you should ask when selecting a preschool that will support the development of self-control in children and provide developmentally appropriate services.

BUILDING:

1.
2.
3.

SPACE:

1.
2.
3.

MATERIALS:

1.
2.
3.

ADULTS:

1.
2.
3.

OTHER:

1.
2.
3.

LEVEL: GENERAL

GOAL: #5 Develop an understanding of a philosophy which provides for the development of self-control that can be used to conceptualize a developmentally appropriate environment and behavior plan for either center-based or itinerant-based preschool learning for all children, those who are typically developing and those with disabilities.

COMPETENCY TYPE: VALUE/ATTITUDE

OBJECTIVE: Participants will believe in a preschool philosophy based on developmentally-appropriate practice that supports the development of self-control in young children.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Small group activity Participants will read a belief statement (from several), and defend its validity using the information presented in this module.	1. Handout/Transparency (G-H39) *Belief Statements*	1. Group can be divided into small groups to react to a belief statement. This activity can also be done individually. Base the decision on the nature of the group and time available.

BELIEF STATEMENTS

1. Services should be provided to preschool-aged children in a setting that encourages the integrated contact of children with disabilities and those who are typically developing.

2. Preschool-aged children should have safe, free access to materials and supplies without the need for adult assistance.

3. Age-appropriate activities should be provided for children both indoors and outdoors so they can learn without being forced into a group.

4. Parents should be full partners in the planning and decision-making process for the education of preschool-aged children.

5. Sensitivity to diversity (e.g., ability, cultural, racial, religious, gender, etc.) is required not only allowed.

LEVEL: GENERAL

GOAL: #5 Develop an understanding of a philosophy which provides for the development of self-control that can be used to conceptualize a developmentally appropriate environment and behavior plan for either center-based or itinerant-based preschool learning for all children, those who are typically developing and those with disabilities.

COMPETENCY TYPE: VALUE/ATTITUDE *(continued)*

OBJECTIVE: Participants will believe in a preschool philosophy based on developmentally-appropriate practice that supports the development of self-control in young children.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Small group activity Participants will be encouraged to develop their own philosophy statement in regard to fostering self-control in young children.	2. Worksheet (G-W18) *Preschool Philosophy*	2. Small groups can brainstorm their statement of philosophy using materials from previous activities in this module.

G-W18

PRESCHOOL PHILOSOPHY

PROJECT

Modules for Competency-Based
Personnel Preparation in
Early Childhood Education

Managing Behaviors

Staff

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GOALS

1. Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

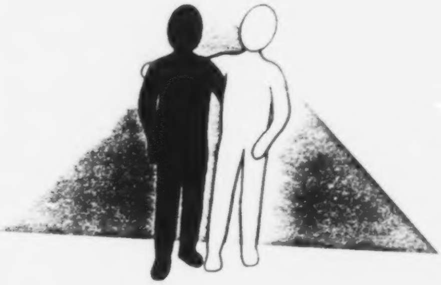
2. Gain competency in developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

3. Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

4. Gain competency in knowing when and how to seek additional resources for managing behaviors that are beyond the scope of the school setting for individual child needs.

5. Develop an understanding of a philosophy which provides for the development of self-control that can be used to conceptualize a developmentally appropriate environment and behavior plan for either center-based or itinerant-based preschool learning for all children, those who are typically developing and those with disabilities.

Managing Behaviors



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LEVEL: STAFF

GOAL: **#1** Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: KNOWLEDGE

OBJECTIVE: Participants will know developmentally appropriate expectations for children ages 1-5 in order to implement appropriate practices for preschoolers.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Review the concept of age and developmental expectation.	1. Handouts (S-H1, 2, and 3) U.S. Government Printing Office. (1980). *Chart of normal development: Infancy to six years of age* Ohio Disabilities Planning Council. *An ounce of prevention* Bredekamp, S. (Ed.) (1987). *Developmentally appropriate practice in early childhood programs serving children from birth through age 8.* (exp. ed.) Washington: NAEYC.	1. Discuss with participants the fact that one of the first issues in dealing with young children's behavior is to understand their development. Birth to three charts are for reference only; will not be developed; may be useful at a later time for clarification in using information about developmental delays. Two or three charts may be used. Charts tend to agree with slight variation. Leader should discuss the idea of age and developmental expectancies as listed on various Handouts. Participants may want to relate to some they find of particular interest. Primary areas within the various information that are relative to this module are: Communication Skills-Receptive and Expressive; Cognitive Skills, and Social Skills. Developmentally appropriate practice is the backbone of setting the stage for developing self-esteem. *(continued on next page)*

LEVEL: STAFF *(continued)*

GOAL: **#1** Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: Participants will know developmentally appropriate expectations for children ages 1-5 in order to implement appropriate practices for preschoolers.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
		The video, *An Ounce of Prevention* (Ohio Disabilitity Planning Council) is available through the SERRC network and could be used either completely or in part for an audience that is unfamiliar with developmental expectations. It is 20 minutes long with the last 10 minutes being more related to the 3-5 age population. If the population being trained represents a significant culture group, resources should be incorporated which are culture specific.

CHART OF NORMAL DEVELOPMENT
(U.S. Government Printing Office, 1980)

24-36 MONTHS

Motor Skills		**Communication Skills**	
Gross Motor Skills	Fine Motor Skills	Understanding Language	Spoken Language
Runs forward well. Jumps in place, two feet together. Stands on one foot, with aid. Walks on tiptoe. Kicks ball forward.	Strings four large beads. Turns pages singly. Snips with scissors. Holds crayon with thumb and fingers, not fist. Uses one hand consistently in most activities. Imitates circular, vertical, horizontal strokes. Paints with some wrist action. Makes dots, lines, circular strokes. Rolls, pounds, squeezes, and pulls clay.	Points to pictures of common objects when they are named. Can identify objects when told their use. Understands question forms **what** and **where.** Understands negatives **no, not, can't,** and **don't.** Enjoys listening to simple storybooks and requests them again.	Joins vocabulary words together in two-word phrases. Gives first and last name. Asks **what** and **where** questions. Makes negative statements (for example, **Can't open it**). Shows frustration at not being understood.

Cognitive Skills		**Self-Help Skills**	**Social Skills**
Responds to simple directions (for example: **Give me the ball and the block. Get your shoes and socks).** Selects and looks at picture books, names pictured objects, and identifies several objects within one picture. Matches and uses associated objects meaningfully (for example, given cup, saucer, and bead, puts cup and saucer together). Stacks rings on peg in order of size. Recognizes self in mirror, saying, baby, or own name.	Can talk briefly about what he or she is doing. Imitates adult actions (for example, housekeeping play). Has limited attention span. Learning is through exploration and adult direction (as in reading of picture stories). Is beginning to understand functional concepts of familiar objects (for example, that a spoon is used for eating) and part/whole concepts (for example, parts of the body).	Uses spoon, spilling little. Gets drink from fountain or faucet unassisted. Opens door by turning handle. Takes off coat. Puts on coat with assistance. Washes and dries hands with assistance.	Plays near other children. Watches other children, joins briefly in their play. Defends own possessions. Begins to play house. Symbolically uses objects, self in play. Participates in simple group activity (for example, sings, claps, dances). Knows gender identity.

S-H1

CHART OF NORMAL DEVELOPMENT (U.S. Government Printing Office, 1980)

36-48 MONTHS

Motor Skills

Gross Motor Skills

Runs around obstacles.

Walks on a line.

Balances on one foot for 5 to 10 seconds.

Hops on one foot.

Pushes, pulls, steers wheeled toys.

Rides (that is, steers and pedals) tricycle.

Uses slide without assistance.

Jumps over 15cm. (6″) high object, landing on both feet together.

Throws ball overhead.

Catches ball bounced to him or her.

Fine Motor Skills

Builds tower of nine small blocks.

Drives nails and pegs.

Copies circle.

Imitates cross.

Manipulates clay materials (for example, rolls balls, snakes, cookies).

Communication Skills

Understanding Language

Begins to understand sentences involving time concepts (for example, **We are going to the zoo tomorrow**).

Understands size comparatives such as **big** and **bigger.**

Understands relationships expressed by **if ... then** or **because** sentences.

Carries out a series of two to four related directions.

Understands when told, Let's **pretend.**

Spoken Language

Talks in sentences of three or more words, which take the form agent-action-object (**I** see the ball) or agent-action-location (Daddy **sit** on chair).

Tells about past experiences.

Uses "s" on nouns to indicate plurals.

Uses "ed" on verbs to indicate past tense.

Refers to self using pronouns **I** or me.

Repeats at least one nursery rhyme and can sing a song.

Speech is understandable to strangers, but there are still some sound errors.

Cognitive Skills

Recognizes and matches six colors.

Intentionally stacks blocks or rings in order of size.

Draws somewhat recognizable picture that is meaningful to child, if not to adult. Names and briefly explains picture.

Asks questions for information (why and how questions requiring simple answers).

Knows own age.

Knows own last name.

Has short attention span.

Learns through observing and imitating adults, and by adult instruction and explanation. Is very easily distracted.

Has increased understanding of concepts of the functions and groupings of objects (for example, can put doll house furniture in correct rooms), and part/whole (for example, can identify pictures of hand and foot as parts of body).

Begins to be aware of past and present (for example: **Yesterday we went to the park. Today we go to the library**).

Self-Help Skills

Pours well from small pitcher.

Spreads soft butter with knife.

Buttons and unbuttons large buttons.

Washes hands unassisted.

Blows nose when reminded.

Uses toilet independently.

Social Skills

Joins in play with other children. Begins to interact.

Shares toys. Takes turns with assistance.

Begins dramatic play, acting out whole scenes (for example, traveling, playing house, pretending to be animals).

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CHART OF NORMAL DEVELOPMENT (U.S. Government Printing Office, 1980)

48-60 MONTHS

Motor Skills		**Communication Skills**	
Gross Motor Skills	Fine Motor Skills	Understanding Language	Spoken Language
Walks backward toe-heel. Jumps forward 10 times, without falling. Walks up and down stairs alone, alternating feet. Turns somersault.	Cuts on line continuously. Copies cross. Copies square. Prints a few capital letters.	Follows three unrelated commands in proper order. Understands comparative like pretty, prettier, and prettiest. Listens to long stories but often misinterprets the facts. Incorporates verbal directions into play activities. Understands sequencing of events when told them (for example, First we have to go to the store, then we can make the cake, and tomorrow we will eat it).	Asks when, how, and why questions. Uses modals like can, will, shall, should, and might. Joins sentences together (for example, I like chocolate chip cookies and milk). Talks about causality by using because and so. Tells the content of a story but may confuse facts.

Cognitive Skills		**Self-Help Skills**	**Social Skills**
Plays with words (creates own rhyming words; says or makes up words having similar sounds). Points to and names four to six colors. Matches pictures of familiar objects (for example, shoe, sock, foot; apple, orange, banana). Draws a person with two to six recognizable parts, such as head, arms, legs. Can name and match drawn parts to own body. Draws, names, and describes recognizable picture. Rote counts to five, imitating adults.	Knows own street and town. Has more extended attention span. Learns through observing and listening to adults as well as through exploration. Is easily distracted. Has increased understanding of concepts of function, time, part/whole relationships. Function or use of objects may be stated in addition to names of objects. Time concepts are expanding. The child can talk about yesterday or last week (a long time ago), about today, and about what will happen tomorrow.	Cuts easy foods with a knife (for example, hamburger patty, tomato slice). Laces shoes.	Plays and interacts with other children. Dramatic play is closer to reality, with attention paid to detail, time, and space. Plays dress-up. Shows interest in exploring sex differences.

CHART OF NORMAL DEVELOPMENT
(U.S. Government Printing Office, 1980)

60-72 MONTHS

Motor Skills		Communication Skills	
Gross Motor Skills	Fine Motor Skills	Understanding Language	Spoken Language
Runs lightly on toes. Walks on balance beam. Can cover two meters (6′6″) hopping. Skips on alternate feet. Jumps rope. Skates.	Cuts out simple shapes. Copies triangle. Traces diamond. Copies first name. Prints numerals 1 to 5. Colors within lines. Has adult grasp of pencil. Has handedness well established (that is, child is left- or right-handed). Pastes and glues appropriately.	Demonstrates pre-academic skills.	There are few obvious differences between child's grammar and adult's grammar. Still needs to learn such things as subject-verb agreement, and some irregular past tense verbs. Can take appropriate turns in a conversation. Gives and receives information. Communicates well with family, friends, or strangers.

Cognitive Skills		Self-Help Skills	Social Skills
Retells story from picture book with reasonable accuracy. Names some letters and numerals. Rote counts to 10. Sorts objects by single characteristics (for example, by color, shape, or size if the difference is obvious). Is beginning to use accurately time concepts of tomorrow and yesterday. Uses classroom tools (such as scissors and paints) meaningfully and purposefully	Begins to relate clock time to daily schedule. Attention span increases noticeably. Learns through adult instruction. When interested, can ignore distractions. Concepts of function increase as well as understanding of why things happen. Time concepts are expanding into an understanding of the future in terms of major events (for example, Christmas will come after two weekends).	Dresses self completely. Ties bow. Brushes teeth unassisted. Crosses street safely.	Chooses own friend(s). Plays simple table games. Plays competitive games. Engages with other children in cooperative play involving group decisions, role assignments, fair play.

AN OUNCE OF PREVENTION
EARLY INTERVENTION AND YOUR BABY
(Ohio Disabilities Planning Council)

While it all seems like child's play, parents should know that everything their baby does from birth to age four is his real business ... the business of growing up healthy and strong. The physical things you see your baby do are called "motor skills". If the fine motor skills aren't developed, the child may have problems writing and reading. If the large body movement, the gross motor skills, don't come along, the youngster may be uncoordinated and find it hard to play and work with other kids.

It's easy to see how the slow development of these skills could put a child behind. And these problems can create emotional trouble for the child, too. If your baby does many of the things earlier than shown in this guide, great! Many kids do. But those who develop slower may be children who have special needs right now!

The person who has the best chance of catching a problem and getting help for the child is the person who knows and loves the child best. That's you ... the most important person in your baby's life.

Let's see how you can help your child grow up to be everything he or she can be by making sure some important events in growing up are reached. We call these events "milestones."

AGE
MILESTONE

8 to 10 weeks
- baby smiles

0 to 3 months
- baby sucks strongly
- baby has good muscle tone (not limp)
- baby has a good grip (not slack arms & legs)
- baby makes cooing noises
- baby will quiet when mom's voice is heard
- baby will look at you and make eye contact

3 to 5 months
- baby lifts head when laid on tummy
- baby laughs out loud
- baby tries different cries and noises — you know when he's mad or wet!
- baby is a copy cat — claps hands or opens mouth when you do

AGE
MILESTONE

6 to 9 months

- baby reaches for toys with either hand
- baby lifts head high while balancing on forearms
- baby's head is not at all wobbly
- baby responds to you as a favorite person
- baby turns head to a voice
- baby can roll over unassisted
- baby can usually sit without support by 8 months
- baby eats with fingers by 9 months
- baby can enjoy new games — can do patty-cake and peek-a-boo
- baby can wave bye-bye
- baby likes to look at his reflection in a mirror
- baby holds arms out when he wants to be held
- baby imitates familiar sounds like "ma-ma" or "da-da"

9 months to 1 year

- baby begins to say things like "ma-ma" with no coaching
- baby has a three-word vocabulary of things he really knows and can call for by around 1 year
- baby knows what "no-no" means, even though it's sometimes ignored
- baby can pull himself to a stand and move around with the furniture's support
- baby should put weight on his foot when walking (if baby walks on his toes, let pediatrician know)
- baby likes to look at pictures in books
- baby understands phrases like "give me that"
- baby usually will have mastered drinking with a cup
- baby can figure out that something out of sight is not gone — for example, looking for a ball under a cup (That's the beginning of reasoning!)

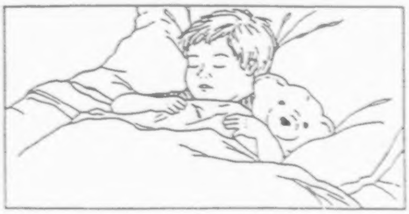
AGE
MILESTONE

1 to 1½ years

- baby usually has learned to stand alone
- baby is walking pretty well by 18 months
- baby sleeps through the night, unless sick or teething
- baby tries to feed self with spoon
- baby chews more, drools less
- baby can drink from a cup very well
- baby likes to dump and pick up things
- baby likes to imitate what you do — for example, sweeping, hammering, or pretending to read
- baby can point to things you call out in pictures
- baby likes to scribble
- baby can point to at least one body part
- baby can say lots of words — 7 to 20 are about right
- baby can make things happen — not just watch things happen (clue: look at how baby handles toys)

1½ to 2 years

- child may be trying to climb stairs
- child is curious about everything
- child can handle crayons pretty well and can draw a line
- child can build a tower four blocks high
- child knows lots of words, and can combine two words now — verbs like "go" and adjectives like "pretty"
- child can call himself by own name
- child recognizes lots of things in pictures — for example, which is "doggie" or "cow"
- child can name more than three body parts
- child can follow simple directions



AGE
MILESTONE

2 to 3 years

- child recognizes and expresses emotion
- child demonstrates "I'm me" in a lot of ways, sometimes negative
- child tells you what he wants — sometimes will demand it (it's a baby's way of learning to be a separate person)
- child dresses himself with help
- child runs pretty well
- child can speak in simple phrases (although at this age, some children may be hard to understand)
- child can build a tower of eight blocks
- child can pedal a tricycle
- child can jump in place
- child can understand and tell you he is cold, hungry, or tired

AGE
MILESTONE

3 to 4 years

- child can use the toilet with few accidents (if not, don't worry — this skill means less than lots of other things like motor development and learning to speak clearly)
- child can balance first on one foot, then on the other
- child can copy simple designs
- child can count to three
- child knows two to three colors
- child knows his first and last name (if you've taught him)
- child talks pretty well now and even people outside the family can understand him (you shouldn't need to translate anymore — if not, check with a speech professional to be sure)

3 to 4 years

- child can follow directions that have more than one step (like "take off your jacket and pick up your toys")
- child will be trying to wash his face and brush his teeth
- child can separate easily from you now to play with friends

WHAT SHOULD YOU DO IF YOU THINK YOUR BABY MAY HAVE SPECIAL NEEDS AFTER EXAMINING THESE "MILESTONES"?

1. *Congratulate yourself for not waiting.*

2. *Talk to your pediatrician or doctor about your worries to make sure your baby isn't being delayed because he can't hear or see well.*

- Have the physical things checked out first
- Point out the things you've noticed
- Don't hesitate to ask persistent questions
- Have your doctor, clinic, or public health nurse point you toward an agency which works with youngster's special needs

3. *Look in your community for resources that are available by checking your phone book ... really look — there's help available! Look up*

- *Mental health, child guidance or mental retardation/developmental disabilities agencies* — these agencies often deal with children's developmental problems
- Your *local school system*
  - — All states require their schools to find special youngsters from birth, not just after they enter school
  - — Ohio's schools are required to evaluate kids and help diagnose developmental and learning problems
- An organization in Ohio called *the Bureau of Crippled Children's Services* — don't let the term "crippled" mislead you ... the agency works for kids with all kinds of problems
- *Family Service Agencies — United Way Health Agencies* and *Children's Hospitals* can help get you with the professional who can help your child
- *Parents' organizations* which are specifically set up to help kids with certain problems — the parents get important help too (groups like *United Cerebral Palsy, the Association for Children and Adults with Learning Disabilities*, or *the Association for Retarded Citizens* in Ohio)
- *Local colleges and universities* — they may have people who can point you in the right direction (try the departments of education, child development or nursing to start)
- Ohio's two excellent resources for figuring out what special services your child may need — *The Nisonger Center* in Columbus and *The Cincinnati Center for Developmental Disorders*
- Centers called *Special Education Regional Resource Centers* — they can help you judge whether your child needs an extra boost, and may know what pre-school programs are available in your community to help (including *Head Start*)

4. *Let's not forget the most important resource of all ... you.*

- Play with your child spontaneously as most parents do ... practicing skills and praising each small accomplishment
- A child with special needs may require a little more help — you may have to [illegible] activities more often or in different ways ... fun things any parent can [illegible]

Will this all be worth it? You bet! You'll be giving your baby the best start possible. Your baby will be one of the lucky ones who have concerned [illegible] Your baby is lucky to have you!

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DEVELOPMENTALLY APPROPRIATE PRACTICE IN EARLY CHILDHOOD PROGRAMS SERVING CHILDREN FROM BIRTH THROUGH AGE 8

Expanded Edition

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PART 4

DEVELOPMENTALLY APPROPRIATE PRACTICE IN PROGRAMS FOR 3-YEAR-OLDS

The 3-year-old is sometimes overlooked when periods of development are described in broad categories like "toddlers" or "preschoolers." But the fourth year of life is a distinct period of development with its own unique challenges and accomplishments. Teachers in programs serving 3-year-olds, as in all early childhood programs, must consider what is appropriate for this age group in general as well as what is specifically appropriate for the individual children in their care.

Three-year-olds are no longer toddlers but they will behave like toddlers at times; at other times their language ability and motor skills will deceptively mimic the 4-year-old. The key for the teacher of 3s is to maintain appropriate expectations; teachers should not expect too little of 3-year-olds, nor should they expect too much. To care for and educate a group of 3s, teachers need to fully understand the developmental continuum from toddlerhood through the preschool years. At 2½, many children begin to display skills and behaviors most typical of 3-year-olds. Thus, children between 2½ and 3½ years of age are often similar developmentally; and some 3½-year-olds share traits of 4s. The common practice of multiage grouping, putting children of a wide age span together, further necessitates that teachers fully understand the continuum of development during the early years.

The following statement describes some developmentally appropriate and inappropriate practices specifically related to 3-year-olds. *This statement is not intended to describe a comprehensive program for 3s. It is intended to be used with the statement on appropriate practice for toddlers* (pages 40-46) *and the statement on appropriate practice for 4- and* [illegible] (pages 51-[illegible])

S-H3

Living and Learning With 3-Year-Olds: Interactions Among Adults and Children and Appropriate Curriculum

APPROPRIATE Practice	INAPPROPRIATE Practice
• Adults provide affection and support, comforting children when they cry and reassuring them when fearful. Adults plan experiences to alleviate children's fears.	• Adults are cold or distant and do not express physical affection, comfort, or emotional bolstering. Adults assume children will get over fears.
• Adults support 3-year-olds' play and developing independence, helping when needed, but allowing them to do what they are capable of doing and what they want to do for themselves ("I can do it myself!").	• Adults expect 3-year-olds to be independent and to entertain themselves for long period of time; they are impatient, hurry children, and do tasks for children that they could do themselves.
• Adults recognize that, although 3-year-olds are usually more cooperative than toddlers and want to please adults, they may revert to toddler behavior (thumb-sucking, crying, hitting, baby talk) when they are feeling shy or upset, especially in a new situation. Adults know that 3-year-olds' interest in babies, and especially their own recent infancy, is an opportunity for children to learn about themselves and human development.	• Adults expect too much of 3-year-olds and ridicule them when they behave immaturely or play baby ("You're acting like a baby!").
• Adults provide opportunities for 3-year-olds to demonstrate and practice their newly developed self-help skills and their desire to help adults with dressing and undressing, toileting, feeding themselves (including helping with pouring milk or setting the table), brushing teeth, washing hands, and helping pick up toys. Adults are patient with occasional toileting accidents, spilled food, and unfinished jobs.	• Adults perform routine tasks (like dressing and cleaning up) for children because it is faster and less messy. Adults punish or shame children for toileting accidents and do not allow children to play with their food. Adults insist that children pick up all the toys every time.
• Adults know that growth rates may slow down and appetites decrease at this age. Children are encouraged to eat "tastes" in small portions with the possibility of more servings if desired.	• Adults serve children a large meal which they are expected to eat. Disciplinary pressures accompany demands for food consumption.
• Adults guide 3-year-olds to take naps or do restful activities periodically throughout the day, recognizing that these younger children may exhaust themselves — especially when trying to keep up with older children in the group.	• Naptime is either forced or not provided. Children are scolded for being cranky or tired as the day progresses.

3-YEAR-OLDS 3-YEAR-OLDS 3-YEAR-OLDS 3-YEAR-OLDS

APPROPRIATE Practice	INAPPROPRIATE Practice
• Adults provide many opportunities for 3s to play by themselves; next to another child (parallel play), or with one or two other children. Adults recognize that 3-year-olds are not comfortable with much group participation. Adults read a story or play music with small groups and allow children to enter and leave the group at will.	• Adults expect children to participate in whole group activities. They read a story to all the children at once, expecting them all to sit and listen quietly. They do not allow children to leave the large group activity.
• Adults support children's beginning friendships, recognizing that such relationships ("my best friend") are short-lived and may consist of acting silly together or chasing for a few minutes. When conflicts arise, the 3-year-old will often return to playing alone. Adults encourage children to take turns and share but do not always expect children to give up favored items.	• Adults expect that children will always want to play with their "friends" and require that they do activities together or share toys. Adults pick out friends for children and keep pairs together over time.
• Adults provide plenty of space and time indoors and outdoors for children to explore and exercise their large muscle skills like running, jumping, galloping, riding a tricycle, or catching a ball, with adults close by to offer assistance as needed.	• Adults restrict children's physical activity ("No running!") or provide limited space and little equipment for large muscle outdoor activity. Adults limit large muscle activity to a short outdoor recess time.
• Adults provide large amounts of uninterrupted time for children to persist at self-chosen tasks and activities and to practice and perfect their newly developed physical skills if they choose.	• Adults become impatient with children who want to repeat a task or activity again and again, OR they force children to repeat tasks that adults have selected as learning activities whether the child is interested or not.
• Adults provide many materials and opportunities for children to develop fine motor skills such as puzzles, pegboards, beads to string, construction sets, and art materials (crayons, brushes, paints, markers, play dough, blunt scissors). Although children's scribbles are more controlled than those of toddlers, and 3-year-olds will create designs with horizontal and vertical strokes, and will sometimes name their drawings and paintings, adults do not expect a representational product. Art is viewed as creative expression and exploration of materials.	• Adults expect children to demonstrate fine motor skills by cutting out figures or shapes, by coloring within the lines in coloring books or on ditto sheets, or following the teacher's directions and model to create identical art products. When children draw or paint pictures, teachers ask "What is it?" and lead children to believe that only a representational picture is valued.

3-YEAR-OLDS 3-YEAR-OLDS 3-YEAR-OLDS 3-YEAR-OLDS

APPROPRIATE Practice	**INAPPROPRIATE Practice**
• Adults provide plenty of materials and time for children to explore and learn about the environment, to exercise their natural curiosity, and to experiment with cause and effect relationships. For example, they provide blocks (that children line up first and later may build into towers); more complex dramatic play props (for playing work and family roles and animals); sand and water with tools for pouring, measuring, and scooping; many toys and tools to experiment with like knobs, latches, and any toy that opens, closes, and can be taken apart; and simple science activities like blowing bubbles, flying kites, or planting seeds.	• Adults may provide blocks and dramatic play areas but have definite ideas about how these areas should be used and restrict materials to the designated area of the room. Water play and sand play are not provided because they are too messy and difficult to supervise. Adults do not provide toys and tools to use in take-apart activities because they require too much time to clean up.
• Adults encourage children's developing language by speaking clearly and frequently to individual children and listening to their response. Adults respond quickly and appropriately to children's verbal initiatives. They recognize that talking may be more important than listening for 3-year-olds. Adults patiently answer children's questions ("Why?" "How come?") and recognize that 3-year-olds often ask questions they know the answers to in order to open a discussion or practice giving answers themselves. Adults know that children are rapidly acquiring language, experimenting with verbal sounds, and beginning to use language to solve problems and learn concepts.	• Adults attempt to maintain quiet in the classroom and punish children who talk too much. Adults speak to the whole group most of the time and only speak to individual children to admonish or discipline them. Adults ridicule children's asking of rhetorical question by saying "Oh, you know that."
• Adults provide many experiences and opportunities to extend children's language and musical abilities. Adults read books to one child or a small group; recite simple poems, nursery rhymes and finger plays; encourage children to sing songs and listen to recordings; facilitate children's play of circle and movement games like London Bridge, Farmer in the Dell, and Ring Around the Rosie; provide simple rhythm instruments; listen to stories that children tell or write down stories they dictate; and enjoy 3-year-olds' sense of humor.	• Adults limit language and music activities because children sometimes become too silly or loud, OR they include story time and music time only as a whole group activity and require children to participate. Adults discipline children for using silly or nonsense language.

APPROPRIATE Practice	INAPPROPRIATE Practice
• Adults know that 3-year-olds do not usually understand or remember the rules. Guidance reasons that are specific to a real situation and that are demonstrated repeatedly are more likely to impress young children.	• Adults expect children to remember and abide by a list of classroom rules. Children are scolded and belittled for not remembering and applying a rule.
• Adults provide a safe, hazard-free environment and careful supervision. Adults recognize that 3-year-olds often overestimate their newly developed physical powers and will try activities that are unsafe or beyond their ability (especially in multiage groups where they may model 4- and 5-year-olds). Adults protect children's safety in these situations while also helping them deal with their frustration and maintain their self-confidence ("Joel can tie his shoe because he's 5; when you're 5, you'll probably know how to tie, too.").	• Adults are careless about supervision especially when 3-year-olds are in a group of mostly 4- and 5-year-olds who are capable of more self-monitoring and control of their own bodies.

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See references on pages 14-16, 32-33, and 61.

S-H3

INTEGRATED COMPONENTS OF APPROPRIATE AND INAPPROPRIATE PRACTICE FOR 4- AND 5-YEAR-OLD CHILDREN

Component	APPROPRIATE Practice	INAPPROPRIATE Practice
Curriculum goals	• Experiences are provided that meet children's needs and stimulate learning in all developmental areas — physical, social, emotional, and intellectual.	• Experiences are narrowly focused on the child's intellectual development without recognition that all areas of a child's development are interrelated.
	• Each child is viewed as a unique person with an individual pattern and timing of growth and development. The curriculum and adults' interaction are responsive to individual differences in ability and interests. Different levels of ability, development, and learning styles are expected, accepted, and used to design appropriate activities.	• Children are evaluated only against a predetermined measure, such as a standardized group norm or adult standard of behavior. All are expected to perform the same tasks and achieve the same narrowly defined, easily measured skills.
	• Interactions and activities are designed to develop children's self-esteem and positive feelings toward learning.	• Children's worth is measured by how well they conform to rigid expectations and perform on standardized tests.
Teaching strategies	• Teachers prepare the environment for children to learn through active exploration and interaction with adults, other children, and materials.	• Teachers use highly structured, teacher-directed lessons almost exclusively.
	• Children select many of their own activities from among a variety of learning areas the teacher prepares, including dramatic play, blocks, science, math, games and puzzles, books, recordings, art, and music.	• The teacher directs all the activity, deciding what children will do and when. The teacher does most of the activity for the children, such as cutting shapes, performing steps in an experiment.
	• Children are expected to be physically and mentally active. Children choose from among activities the teacher has set up or the children spontaneously initiate.	• Children are expected to sit down, watch, be quiet, and listen, or do paper-and-pencil tasks for inappropriately long periods of time. A major portion of time is spent passively sitting, listening, and waiting.

Component	APPROPRIATE Practice	INAPPROPRIATE Practice
	• Children work individually or in small, informal groups most of the time.	• Large group, teacher-directed instruction is used most of the time.
	• Children are provided concrete learning activities with materials and people relevant to their own life experiences.	• Workbooks, ditto sheets, flashcards, and other similarly structured abstract materials dominate the curriculum.
	• Teachers move among groups and individuals to facilitate children's involvement with materials and activities by asking questions, offering suggestions, or adding more complex materials or ideas to a situation.	• Teachers dominate the environment by talking to the whole group most of the time and telling children what to do.
	• Teachers accept that there is often more than one right answer. Teachers recognize that children learn from self-directed problem solving and experimentation.	• Children are expected to respond correctly with one right answer. Rote memorization and drill are emphasized.
Guidance of social-emotional development	• Teachers facilitate the development of self-control in children by using positive guidance techniques such as modeling and encouraging expected behavior, redirecting children to a more acceptable activity, and setting clear limits. Teachers' expectations match and respect children's developing capabilites.	• Teachers spend a great deal of time enforcing rules, punishing unacceptable behavior, demeaning children who misbehave, making children sit and be quiet, or refereeing disagreements.
	• Children are provided many opportunities to develop social skills such as cooperating, helping, negotiating, and talking with the person involved to solve interpersonal problems. Teachers facilitate the development of these positive social skills at all times.	• Children work individually at desks or tables most of the time or listen to teacher directions in the total group. Teachers intervene to resolve disputes or enforce classroom rules and schedules.

Component	APPROPRIATE Practice	INAPPROPRIATE Practice
Language development and literacy	• Children are provided many opportunities to see how reading and writing are useful before they are instructed in letter names, sounds, and word identification. Basic skills develop when they are meaningful to children. An abundance of these types of activities is provided to develop language and literacy through meaningful experience: listening to and reading stories and poems; taking field trips; dictating stories; seeing classroom charts and other print in use; participating in dramatic play and other experiences requiring communication; talking informally with other children and adults; and experimenting with writing by drawing, copying, and inventing their own spelling.	• Reading and writing instruction stresses isolated skill development such as recognizing single letters, reciting the alphabet, singing the alphabet song, coloring within predefined lines, or being instructed in correct formation of letters on a printed line.
Cognitive development	• Children develop understanding of concepts about themselves, others, and the world around them through observation, interacting with people and real objects, and seeking solutions to concrete problems. Learnings about math, science, social studies, health, and other content areas are all integrated through meaningful activities such as those when children build with blocks; measure sand, water, or ingredients for cooking; observe changes in the environment; work with wood and tools; sort objects for a purpose; explore animals, plants, water, wheels and gears; sing and listen to music from various cultures; and draw, paint, and work with clay. Routines are followed that help children keep themselves healthy and safe.	• Instruction stresses isolated skill development through memorization and rote, such as counting, circling an item on a worksheet, memorizing facts, watching demonstrations, drilling with flashcards, or looking at maps. Children's cognitive development is seen as fragmented in content areas such as math, science, or social studies, and times are set aside to concentrate on each area.

Component	APPROPRIATE Practice	INAPPROPRIATE Practice
Physical development	• Children have daily opportunities to use large muscles, including running, jumping, and balancing. Outdoor activity is planned daily so children can develop large muscle skills, learn about outdoor environments, and express themselves freely and loudly.	• Opportunity for large muscle activity is limited. Outdoor time is limited because it is viewed as interfering with instructional time or, if provided, is viewed as recess (a way to get children to use up excess energy), rather than an integral part of children's learning environment.
	• Children have daily opportunities to develop small muscles skills through play activities such as pegboards, puzzles, painting, cutting, and other similar activities.	• Small motor activity is limited to writing with pencils, or coloring predrawn forms, or similar structured lessons.
Aesthetic development	• Children have daily opportunities for aesthetic expression and appreciation through art and music. Children experiment and enjoy various forms of music. A variety of art media are available for creative expression, such as easel and finger painting and clay.	• Art and music are provided only when time permits. Art consists of coloring predrawn forms, copying an adult-made model of a product, or following other adult-prescribed directions.
Motivation	• Children's natural curiosity and desire to make sense of their world are used to motivate them to become involved in learning activities.	• Children are required to participate in all activities to obtain the teacher's approval, to obtain extrinsic rewards like stickers or privileges, or to avoid punishment.
Parent-teacher relations	• Teachers work in partnership with parents, communicating regularly to build mutual understanding and greater consistency for children.	• Teachers communicate with parents only about problems or conflicts. Parents view teachers as experts and feel isolated from their child's experience.
Assessment of children	• Decisions that have a major impact on children (such as enrollment, retention, assignment to remedial classes) are based primarily on information obtained from observations by teachers and parents, not on the basis of a single test score. Developmental assessment of children's progress and achievement is used to plan curriculum, identify children with special needs, communicate with parents, and evaluate the program's effectiveness.	• Psychometric tests are used as the sole criterion to prohibit entrance to the program or to recommend that children be retained or placed in remedial classrooms.

4- AND 5-YEAR-OLDS	4- AND 5-YEAR-OLDS	4- AND 5-YEAR-OLDS
Component	**APPROPRIATE Practice**	**INAPPROPRIATE Practice**
Program entry	• In public schools, there is a place for every child of legal entry age, regardless of the developmental level of the child. No public school program should deny access to children on the basis of results of screening or other arbitrary determinations of the child's lack of readiness. The educational system adjusts to the developmental needs and levels of the children it serves; children are not expected to adapt to an inappropriate system.	• Eligible-age children are denied entry to kindergarten or retained in kindergarten because they are judged not ready on the basis of inappropriate and inflexible expectations.
Teacher qualifications	• Teachers are qualified to work with 4- and 5-year-olds through college-level preparation in Early Childhood Education or Child Development and supervised experience with this age group.	• Teachers with no specialized training or supervised experience working with 4- and 5-year-olds are viewed as qualified because they are state certified, regardless of the level of certification.
Staffing	• The group size and ratio of teachers to children is limited to enable individualized and age-appropriate programming. Four- and 5-year-olds are in groups of no more than 20 children with two adults.	• Because older children can function reasonably well in large groups, it is assumed that group size and number of adults can be the same for 4- and 5-year-olds as for elementary grades.

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LEVEL: STAFF

GOAL: #1 Gain competency in the concept of developmental appropriateness [illegible] developing as an element in the development of self-control.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: Participants will know developmentally appropriate expectations for children ages 1-5 in order to implement appropriate practices for preschoolers.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Small group activity Define developmentally appropriate practice for children aged 3-5.	2. Worksheet/Transparency (S-W1) *A Definition of Developmental Appropriateness.* Handout/Transparency (S-H4, S-T1) *NAEYC Definition of Developmental Appropriateness*	2. Using the page provided with the materials, have participants attempt to define Developmentally Appropriate for children aged 3-5. They may work in small groups or individually. Ask them to think about how this relates to behavior issues for young children. List a few general ideas from the group on a Transparency, chart, or chalkboard. After group has attempted to develop a definition, compare and contrast it to NAEYC definition.

A DEFINITION OF DEVELOPMENTAL APPROPRIATENESS

S-H4

DEFINITION OF DEVELOPMENTAL APPROPRIATENESS

NATIONAL ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN

November 1986

The concept of developmental appropriateness has two dimensions: age appropriateness and individual appropriateness.

Age Appropriateness:

Human development research indicates that there are universal, predictable sequences of growth and change that occur in children during the first nine years of life. These predictable changes occur in all domains of development — physical, emotional, social, and cognitive. Knowledge of typical development of children within the age span served by the program provides a framework from which teachers prepare the learning environment and plan appropriate experiences.

Individual Appropriateness:

Each child is a unique person with an individual pattern and timing of growth, as well as individual personality, learning style, and family background. Both the curriculum and adults' interactions with children should be responsive to individual differences. Learning in young children is the result of interaction between the child's thoughts and experiences with materials, ideas, and people. These experiences should match the child's developing abilities while also challenging the child's interest and understanding.

NAEYC, November 1986

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National Association for the Education of Young Children, November 1986

Individual Appropriateness:

Each child is a unique person with an individual pattern and timing of growth, as well as individual personality, learning style, and family background. Both the curriculum and adults' interactions with children should be responsive to individual differences. Learning in young children is the result of interaction between the child's thoughts and experiences with materials, ideas, and people. These experiences should match the child's developing abilities while also challenging the child's interest and understanding.

National Association for the Education of Young Children, November 1986

LEVEL: STAFF

GOAL: **#1** Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: SKILL

OBJECTIVE: Participants will select appropriate practices for preschoolers aged 3-5 based on developmental appropriateness in various settings.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Given case studies for children of various ages and various disabilities in a a. home setting b. integrated preschool c. center-based preschool Participants will compare them to the charts to determine developmentally appropriate practices.	1. Handout/Transparency (S-H5, S-T2) Case studies for discussion Developmental charts from first activity in this section (S-H1 and 2)	1. Additional case studies directly related to the particular group could be more effective. It is not necessary to use all studies depending on the group. Discuss how issues of diversity (e.g., ability, cultural, racial, religious, gender, etc.) might also be an issue in these situations.

S-H5

CASE STUDIES FOR DISCUSSION

Jona is three years old. He attends a community-based preschool with other three-year-olds. There are several children who have disabilities in the class of 16 children with a teacher and an aide. Twice a week Jona's "special friend," the itinerant preschool special education teacher from the public school, comes to the class to work with Jona. She works with him within the classroom. Other children want to join them which is encouraged. They work together and compliment each other when they complete a task or feel success. On one day, Jona refuses to work with the teacher. He chooses to continue to play with a firetruck away from all children. The teacher asks him to join them. When he doesn't, she joins him on the floor. He moves away. She returns to the group and they begin to work with the things she brought in her basket. All of the tasks are related to categorizing food into shapes. The other children get very excited about the surprises in her basket. One of the children tells Jona that he better come over because she has more "stuff" in the basket. Jona watches, turns his back, and then inches over to the group. The teacher hands him a cookie and asks him to put it with other circles. He does. The other children agree that he is right and say that he did a good job. From then on Jona works with the teacher and the other children. Near the end of the session, the teacher goes with Jona to the water table and the two of them play a search game. When she leaves, Jona and other children wave good-bye. The children go to the water table and play together.

Susan is a four-year-old who attends a half-day preschool center-based program for five days a week. Susan has just started in the preschool with six other children. All of the children have a disability. There is a wide range of disabilities. Susan has a very short attention span which appears to be inhibiting her language and cognitive development. While the teacher and aide recognize the differences in the children, they are also attempting to gain and sustain Susan's attention for longer periods of time. They have found that she does not play well with others, but will sustain attention longer when she plays house with her doll, a teddy bear, and one friend. The teacher has suggested that the two girls try some activities that are in the house. They are to be sure to invite the doll and bear to play. When they have completed the activity, the teacher would like to be invited to join them. The girls play with their toys and using the suggested activities, set the table (following a model), pretend to fix the food, and then ask the teacher to join. Language activities follow as the teacher, friend, Susan, bear, and doll participate in the party. As the party is ending, Susan asks two other children to join them. She has followed some simple directions, played, worked cooperatively with a friend, conversed with her friend and the teacher, and asked others to join them. She has played at this task for 25 minutes.

Fred is three years old. He does not attend a formal preschool program although he does play with other children in a neighborhood play group and at the bowling alley nursery once a week. He receives two hours of itinerant teacher service and an hour of speech/language therapy per week. On a monthly basis the occupational therapist works with his mother in a consultative role and observes Fred for a portion of the hour. Fred is not talking. He seems to get what he wants through a variety of motions and noises. There does not appear to be any physical reason for his language disability. He seems to have average or above receptive skills as can be seen by his response to all conversations. The itinerant teacher, speech/language therapist, and occupational therapist are attempting to work with Fred and his family to start a communication process. Other family members are being cautioned to let him represent himself instead of thinking for him.

Taunya is a five-year-old child with Down Syndrome. She seems to have relatively strong cognitive and language skills. Her gross and fine motor skills are developing more slowly. She is quite social and can be quite headstrong at times. She is from a large family where she experiences many activities with other children. She is in a regular kindergarten class each morning. Twice a week the itinerant teacher comes to her class and spends time with her. The occupational therapist provides consultative services to the kindergarten teacher and the preschool specialist. The physical therapist works with her twice a month and provides consultative services to the physical education teacher. When Taunya becomes willful and unable to follow directions, the teachers have developed a plan that starts with redirection and then specific limits. They have found that her favorite activity is story time where she is quite involved in the language activities. If Taunya is unable to gain self-control when she has been beyond the limits, she is not allowed to sit in the circle for story time. They have found that the idea of missing the group story time is meaningful to her. As a result, they are now able to remind her that she must stay within the limits so that she can come to the circle. She does react to praise when she follows directions, so they also praise her whenever possible. They are finding fewer instances of willful behavior.

CASE STUDIES FOR DISCUSSION

Jona is three years old. He attends a community-based preschool with other three-year-olds. There are several children who have disabilities in the class of 16 children with a teacher and an aide. Twice a week Jona's "special friend," the itinerant preschool special education teacher from the public school, comes to the class to work with Jona. She works with him within the classroom. Other children want to join them which is encouraged. They work together and compliment each other when they complete a task or feel success. On one day, Jona refuses to work with the teacher. He chooses to continue to play with a firetruck away from all children. The teacher asks him to join them. When he doesn't, she joins him on the floor. He moves away. She returns to the group and they begin to work with the things she brought in her basket. All of the tasks are related to categorizing food into shapes. The other children get very excited about the surprises in her basket. One of the children tells Jona that he better come over because she has more "stuff" in the basket. Jona watches, turns his back, and then inches over to the group. The teacher hands him a cookie and asks him to put it with other circles. He does. The other children agree that he is right and say that he did a good job. From then on Jona works with the teacher and the other children. Near the end of the session, the teacher goes with Jona to the water table and the two of them play a search game. When she leaves, Jona and other children wave good-bye. The children go to the water table and play together.

S-T2

Susan is a four-year-old who attends a half-day preschool center-based program for five days a week. Susan has just started in the preschool with six other children. All of the children have a disability. There is a wide range of disabilities. Susan has a very short attention span which appears to be inhibiting her language and cognitive development. While the teacher and aide recognize the differences in the children, they are also attempting to gain and sustain Susan's attention for longer periods of time. They have found that she does not play well with others, but will sustain attention longer when she plays house with her doll, a teddy bear, and one friend. The teacher has suggested that the two girls try some activities that are in the house. They are to be sure to invite the doll and bear to play. When they have completed the activity, the teacher would like to be invited to join them. The girls play with their toys and using the suggested activities, set the table (following a model), pretend to fix the food, and then ask the teacher to join. Language activities follow as the teacher, friend, Susan, bear, and doll participate in the party. As the party is ending, Susan asks two other children to join them. She has followed some simple directions, played, worked cooperatively with a friend, conversed with her friend and the teacher, and asked others to join them. She has played at this task for 25 minutes.

S-T2

Fred is three years old. He does not attend a formal preschool program although he does play with other children in a neighborhood play group and at the bowling alley nursery once a week. He receives two hours of itinerant teacher service and an hour of speech/language therapy per week. On a monthly basis the occupational therapist works with his mother in a consultative role and observes Fred for a portion of the hour. Fred is not talking. He seems to get what he wants through a variety of motions and noises. There does not appear to be any physical reason for his language disability. He seems to have average or above receptive skills as can be seen by his response to all conversations. The itinerant teacher, speech/language therapist, and occupational therapist are attempting to work with Fred and his family to start a communication process. Other family members are being cautioned to let him represent himself instead of thinking for him.

S-T2

Taunya is a five-year-old child with Down Syndrome. She seems to have relatively strong cognitive and language skills. Her gross and fine motor skills are developing more slowly. She is quite social and can be quite headstrong at times. She is from a large family where she experiences many activities with other children. She is in a regular kindergarten class each morning. Twice a week the itinerant teacher comes to her class and spends time with her. The occupational therapist provides consultative services to the kindergarten teacher and the preschool specialist. The physical therapist works with her twice a month and provides consultative services to the physical education teacher. When Taunya becomes willful and unable to follow directions, the teachers have developed a plan that starts with redirection and then specific limits. They have found that her favorite activity is story time where she is quite involved in the language activities. If Taunya is unable to gain self-control when she has been beyond the limits, she is not allowed to sit in the circle for story time. They have found that the idea of missing the group story time is meaningful to her. As a result, they are now able to remind her that she must stay within the limits so that she can come to the circle. She does react to praise when she follows directions, so they also praise her whenever possible. They are finding fewer instances of willful behavior.

LEVEL: STAFF

GOAL: **#1** Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: SKILL *(continued)*

OBJECTIVE: Participants will select appropriate practices for preschoolers aged 3-5 based on developmental appropriateness in various settings.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Large group activity Participants will describe appropriate practices from their experiences. Comparison to charts of development will reinforce the development of the skill as well as verify the participants' knowledge, either formal or informal, of the importance of developmentally-appropriate practices.	2. The developmental charts continue to be needed (S-H1 and 2) Worksheet/Transparency (S-W2) *Developmentally Appropriate Experiences* for group	2. Use your discretion as to how detailed this activity needs to be developed depending on the audience. This activity may involve asking participants to read each of the developmental categories and share an experience, either positive or negative, that relates. Most participants will be able to share negatives that will help verify the importance of developmentally-appropriate practice. Some examples may be: – Expecting three year olds to share toys – Expecting four year olds to name the letters of the alphabet – Arranging a classroom for preschoolers around desk or table activities – Structuring activities throughout the day with no time for play – Children are given shapes that have been cut out for activities – Culturally diverse activities Ask participants to describe how these practices support the positive development of self-control in young children.

S-W2

DEVELOPMENTALLY APPROPRIATE EXPERIENCES

LEVEL: STAFF

GOAL: **#1** Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: VALUE/ATTITUDE

OBJECTIVE: Participants will evaluate strategies, interventions, instructional methods, and curricula based on developmentally appropriate practices.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Given appropriate and inappropriate examples of strategies, instructional methods, and curricula, participants will name appropriateness and/or inappropriateness of each based on developmental levels.	1. Handout/Transparency (S-H6, S-T3) *Curriculum* *Strategies* (S-H7, S-T4) *Instructional Methods* (S-H8, S-T5) Worksheet/Transparency (G-W3) *Developmentally Appropriate? Inappropriate?*	1. If Transparency is used, give Handout appropriate/inappropriate sheet for notes. Discussion could elicit varied responses. Reference to developmental information may be needed. Note how these strategies, methods, etc. either support or detract from the development of self-control in young children.

S-H6

CURRICULUM

The ABC preschool curriculum is very focused on preparing children academically for Kindergarten according to the information prepared for parents. The children arrive each day and put their belongings away. They are to work in various centers on a free choice basis until all children have arrived. At that point they start calendar time. Each day the group discusses the date, weather, special activities and then does a song or finger play. The group has a large repertoire of songs and finger plays. Each day two children lead the group in a favorite of their choice. A letter a week is introduced. The children are expected to be able to name it, recognize it, print it (upper and lower case), give its sound and are encouraged to name words that begin with the sound. Repeated drill of these skills occurs each day for previously learned letters. Children go to the table for group language arts after calendar time. They are given lined paper and asked to write their name and practice the new letter and one review letter for several lines. A group project that relates to the letter is then presented. The teacher gives the children pieces of an art project that are cut out and asks them to glue them in a prescribed manner. All of the projects look much the same. After language time, the children get their snack and converse during snack time. They are encouraged to use good manners during eating. After a restroom break, the children return to the table where they work on number readiness. The goal is that each child will be able to count to 20, recognize numbers to 10, match number to sets to 10, describe sets as more, less, or the same, and write numbers in order and from dictation to 10. The morning ends with play time, a story, and then clean-up. Several times a week the children go to the gym for large motor activities. The preschool prides itself on how well its children are prepared for Kindergarten.

The XYZ preschool curriculum considers itself to be a child-centered curriculum that provides many experiences for children before they enter Kindergarten. There are many centers in the room. The staff prides itself on developing centers that provide children with many opportunities to use language with their peers, play in a small group setting, and develop small and large motor skills through the use of a variety of equipment. The children arrive at school, put their belongings away, and then select a center or activity. Teachers go between centers, sit on the floor with the children, and interact with them throughout the morning. Their goals include increasing receptive and expressive language skills, fostering growth in socialization skills, aiding growth in motoric development, enhancing self-esteem, and providing for the growth of self-control in the children. They watch for the "teachable moments" throughout the morning and work with individual children or small groups of children. The children are encouraged to participate in some whole group activities such as story time, rhythmic activities, and snack time; however, children do not have to join the whole group. There are many opportunities for children to "pretend." Rules and regulations are kept to a minimum, but children are expected to follow the rules. Positive discipline methods are used.

CURRICULUM

ABC PRESCHOOL

FOCUS: Preparation for Kindergarten

STRUCTURE: Established routine with a variety of structured/unstructured activities spread throughout the day

CURRICULUM:

- Language, letter acquisition, handwriting, socialization, manners, art projects, pre-math (numbers 1-10), gross motor development
- Table work
- Teacher-initiated activities and child-selected activities

CURRICULUM

XYZ PRESCHOOL

FOCUS: Child-centered, experience based

STRUCTURE: Established routine with a variety of centers.

CURRICULUM:

- Language, play, development of small and large motor skills, socialization growth, self-control
- Adults move among centers focusing on "teachable moments"
- Few large group required activities

S-H7

STRATEGIES

When a child wants to play at a center instead of join the large group, the teacher or aide talks quietly with the child, takes him by the hand, and walks to the large group staying with him to help him adjust to the large group. If he chooses to leave the group, he is not allowed to return to the center. Instead, he must go to the "quiet corner", a chair in the far corner of the room where there are no distractions. He may return to the large group or stay in the chair.

When it is story time, the teacher makes a five minute anticipatory statement. The children are told that she will be reading a story about a picnic for bears in the story corner in a few minutes. She would like to have those who want to read the story join her after they have finished their activity and put it away. She then lets the children finish their activity, rings a bell and goes to the story center. When several children are there, she begins to talk about the story with the children. She reads the story. If children do not come to the story hour, they are not punished or challenged. Most children join the group. Even those who are still in the centers seem to listen to the story.

S-T4

STRATEGIES

- Adults attempt to direct or lead children to adult-selected activities
- Time out chair
- Child decides when to return to group
- Anticipatory transition
- Children make choices
- No adult generated consequences for choice

INSTRUCTIONAL METHOD

The children sit at the activity tables. The teacher shows them a finished example of the activity they are to do. He then shows them how they are to do it, being careful to tell them the order that must be followed. They will be given cut out pieces that are to be glued into place. When they are finished gluing, they may decorate one part with crayons. They are to put their name on the back of the paper. He will show them each step so they can do it just right.

The children are seated at the activity tables. The teacher has used an art project during the story that she just read to them. She asks if they would like to make something like it. She then hands out scissors and construction paper cut into fourths. She tells them to wait to get started until everyone is ready. Using the scissors she models how to cut the first part. She says to the children, "Try to cut it about this big and about this shape. If you need help, ask a neighbor or me." She walks around the table helping those children who are unable to attempt it and encouraging those who are cutting. She continues with similar steps until the project is completed, helping some children, complimenting others. When they are finished, she encourages all of them to show each other and appreciate each other's work. The projects show individual creativity and differences in skill acquisition.

S-T5

INSTRUCTIONAL METHOD

- Children sit at tables
- Teacher shows a finished sample
- Teacher shows them procedure
- Parts handed out for gluing
- Children decorate
- Children put name on back
- All products look similar

S-W3

INSTRUCTIONAL METHOD

- Children seated at activity tables
- Story has been read with use of a paper prop
- Children asked to make prop
- Children encouraged to follow directions as well as they can
- Provision is made for individual levels
- Help is available and encouraged
- Creativity is encouraged

LEVEL: STAFF

GOAL: **#1** Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: VALUE/ATTITUDE *(continued)*

OBJECTIVE: Participants will appreciate the need to evaluate strategies, interventions, instructional methods, and curricula based on developmentally appropriate practices.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Small group activity Participants will role play inappropriate and appropriate practices.	2. Handout/Transparency (S-H9, S-T6) *Role-Playing Tasks* Information will be given to groups to develop an appropriate and an inappropriate way to deal with the situation.	2. Four situations are provided. Separate the group into eight groups and assign either an appropriate or inappropriate role to each group. Depending on the group, it may be more effective to develop group appropriate tasks. If the group is made up of school-age personnel, it may be wise to focus on differences between school-age and preschool children. If the group is made up of preschool personnel, the focus may need to be more related to the disability needs. A discussion may follow each group with the addition of other suggestions based on developmentally appropriate practice. Ask groups to share their thoughts following the role plays. Encourage them to share how appropriate or inappropriate practices influence young children's behaviors.

S-H9

ROLE-PLAYING TASKS

Suzette is four. While she has disabilities in the areas of language and cognitive skills, her mother is certain that she can read if she is taught. She is quite insistent that Suzette learn to sound the consonant letters and begin to read sight words.

Shawn is five. He has been in preschool for two years in a center-based special program for children with disabilities. This year he is in a regular Kindergarten with a special educator coming to work with him three times a week for 45 minutes each time. Shawn has some unique behaviors that make him seem autistic-like, but he loves language arts and is eager to read. He cannot work in the large group without getting over excited, but he works well independently on prereading and writing skills.

Ida is three. She is visually impaired, but with special lenses she is able to be quite independent in the classroom. She does not ask questions, but has already learned to watch what the other children are doing if she cannot see what the teacher is doing. She is expected to do everything that the other children do in the classroom.

Sam has a severe expressive language delay. He is four years old in a shared classroom with other children with disabilities and typically developing children. His receptive skills are normal. He does not communicate with the other children, but he does use motions to express his needs. The other children are quite adept at understanding his needs. His speech/language pathologist has found that when one waits for him to express his needs he can do it, but doesn't unless he has to.

S-T6

ROLE-PLAYING TASKS

Suzette is four. While she has disabilities in the areas of language and cognitive skills, her mother is certain that she can read if she is taught. She is quite insistent that Suzette learn to sound the consonant letters and begin to read sight words.

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S-T6

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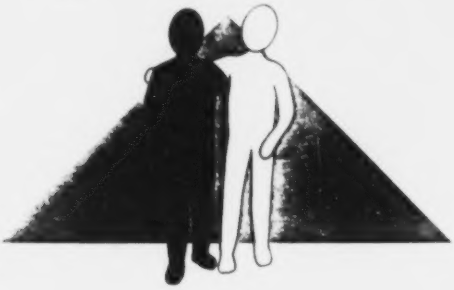
GOAL 2

Managing Behaviors



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LEVEL: STAFF

GOAL: #2 Gain competency in the concept of developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

COMPETENCY TYPE: KNOWLEDGE

OBJECTIVE: Participants will be able to select appropriate environmental components and relate them to developmental needs.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Participants will be given a description of appropriate environmental components.	1. Transparency/Handout (S-T7) *Definitions of Developmentally Appropriate Preschool Environments* Handouts (S-H10 and 11) *Center-based Services* (Ohio Department of Education) *Itinerant Services* (Ohio Department of Education)	1. The leader may wish to encourage the participation of the participants by asking questions to stimulate discussion using the Transparency prior to presentation of the Handouts. Ask participants to discuss how provision of appropriate environmental components might influence a young child's behavior.

S-T7

DEFINITIONS OF DEVELOPMENTALLY APPROPRIATE PRESCHOOL ENVIRONMENTS

I. Center-based Services
   A. Shared classroom
   B. Enrollment of typically developing children
   C. Mainstreaming
   D. Reverse mainstreaming
   E. Separate class

II. Itinerant Services
   A. Itinerant services
   B. Home environment

CENTER-BASED SERVICES

Center-based services are defined as classroom programs that provide group educational experiences to children of similar ages or developmental levels on a regularly scheduled basis and in a central location. The center-based model includes several possible methods of service delivery:

- **Shared Classroom.** In this arrangement one class for children with disabilities and one class for typically developing children share the same classroom space. Teachers "team plan and teach."
- **Enrollment of Typical Peers.** In this arrangement up to six age-eligible typically developing children are enrolled in a special class for the purpose of establishing an integrated class setting.
- **Mainstreaming.** In this arrangement children with disabilities are enrolled in a special class and also participate in planned activities that take place within preschool programs for typically developing children.
- **Reverse Mainstreaming.** In this arrangement children who are enrolled in programs for typically developing children participate in some of the activities that take place within the special class setting.
- **Separate Class.** In this arrangement children with disabilities are enrolled in a special class with no planned interaction with typically developing, age-mate children. In this case the nature and degree of disability that necessitates separate class placement must be well documented.

Ohio Department of Education, Division of Early Childhood. *Rules Implementation Monograph*. (Series 2, Draft 3/91).

ITINERANT SERVICES

Itinerant services are defined as services provided by preschool special education teachers or related services personnel which occur in the setting where the child or the child and parent(s) are located as opposed to providing services at a centralized location. The itinerant model includes two methods of service delivery:

- Services delivered in the home environment;
- Services delivered to children attending a preschool/kindergarten program for typically developing children.

Home environment is defined as the residence of the child and the child's parent(s). In addition to providing itinerant services to children attending a public school preschool or kindergarten program, services may also be provided to children attending a licensed community-based preschool/kindergarten where a qualified staff member is assigned to the child.

Ohio Department of Education, Division of Early Childhood. *Rules Implementation Monograph.* (Series 2, Draft 3/91).

LEVEL: STAFF

GOAL: **#2** Gain competency in the concept of developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: Participants will be able to select appropriate environmental components and relate them to developmental needs.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Small group activity Given a list of materials/equipment and activities that might be present in a preschool, participants will select appropriate items. Participants will describe the reasoning for the elimination of others.	2. Handout/Transparency (S-H12, S-T8) *Classroom Areas for Developmental Skill Enhancement* Huron County Public Schools Worksheet (S-W4) *Selection of Appropriate Items/Areas* *Reasoning for eliminating others*	2. Given the group and time, the leader may wish to have the group divide themselves into groups of three or four. Participants should be asked to consider how issues of diversity (e.g., ability, cultural, racial, religious, gender, etc.) might influence selection. Also, how the inclusion of children with specific types of disabilities affect selection. Discuss how selection of materials/equipment may influence children's behaviors.

S-H12

CLASSROOM AREAS FOR DEVELOPMENTAL SKILL ENHANCEMENT

Learning activities and materials will be concrete, real, and relevant to the lives of young children. Learning will take place as young children touch, manipulate, and experiment with things and interact with people. Pictures and stories will frequently be used to build upon the child's real experiences with things and interaction with people.

Our classrooms consist of various different areas where developmental skills are enhanced.

Reading/Language Arts Area: Children use books, audio tapes, and games to help them understand the relationship between spoken and written language. Most importantly, children will enjoy both forms of language.

Block Area: Block play encourages children to use their imagination, requires cooperation with others, and helps develop eye-hand coordination. Blocks also help develop understanding of shapes, measurement, and balance.

Housekeeping Area: Children use creative thinking, develop skills in communicating and relating to others, using furniture, dress-up clothes, cooking and cleaning tools.

Manipulative Area: Children handle small puzzle pieces, beads, and sewing toys, developing fine motor skills and eye-hand coordination. Children also develop math skills by comparing sizes, colors, and shapes, and by grouping small manipulative items.

Woodworking Area: Children use soft wood, tools, and measuring instruments to develop large and small muscle control, problem solving, creative expression, cooperation, and respect for others.

Science Area: Children use magnets, weighing and measuring instruments, and magnifying glasses, to learn about the world around them. They observe, measure, classify, predict, experiment, and communicate their discoveries. Young children will begin to develop habits of problem solving and investigating — asking "Why?", and then finding out!

Art Area: Children use creativity here. They also develop fine muscle control and eye-hand coordination. They learn about color, line, shape and texture, using paints, crayons, paper, clay, paste, scissors, and markers. They also may feel more comfortable in expressing themselves through painting or drawing than with language.

Water and Sand Area: Children use water, rice, sand, corn meal, corn starch, measuring cups, mixers, sponges, funnels, and objects that sink or float, will learn math and science. They weigh and measure, and learn properties of materials. They use imaginative play and cooperate with others, while using small and large muscles in digging, hauling, pouring, and cleaning up.

Large Muscle Activities: Children will use the courtyard or outdoor area when weather permits, and otherwise the gym area for supervised activity. They will use balance beams, mats, tunnels, balls, and other materials, to develop physical skills such as pulling, pushing, riding, jumping, and running. Play during this time requires cooperation and following teacher direction. Many time numbers/counting and spatial concepts such as over/under, up/down, in/out, etc., are developed.

Huron County Public Schools (1990). *"On the right track" public preschool program.* Norwalk OH: Division of Education.

S-T8

CLASSROOM AREAS FOR DEVELOPMENTAL SKILL ENHANCEMENT

HOUSEKEEPING AREA

MANIPULATIVE AREA

WATER AND SAND AREA

LARGE MUSCLE ACTIVITIES

READING/LANGUAGE ARTS AREA

BLOCK AREA

WOODWORKING AREA

SCIENCE AREA

ART AREA

S-W4

SELECTION OF APPROPRIATE ITEMS/AREAS

From Classroom Areas for Developmental Skill Enhancement, (S-H2), list at least five appropriate items/areas present in a preschool.

1.

2.

3.

4.

5.

REASONING FOR ELIMINATING OTHERS

Using the same information sheet, list any items/areas which you would eliminate and state your reasoning.

1.

2.

3.

4.

5.

LEVEL: STAFF

GOAL: **#2** Gain competency in the concept of developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

COMPETENCY TYPE: SKILL

OBJECTIVE: Participants will develop plans for an environment that provides for the needs of the preschooler with disabilities and the preschooler who is typically developing especially as it relates to a child's growth in personal control.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Small group activity Participants will brainstorm an ideal environment to enhance learning for a preschool child in either an itinerant or special class setting. Using information provided, participants will add environmental factors, if needed.	1. Worksheet/Transparency (S-W5) *Ideal Environments* Handout/Transparency (S-H13) *Factors For an Ideal Environment*	1. Brainstorm an ideal environment for itinerant setting and/or special class setting. For definitions of itinerant and special class programs, refer to information sheets. Review/discuss factors for itinerant and special class programs. Note how various features might contribute to or detract from the development of self-control in young children. Ask participants to consider features of the environment that could reflect sensitivity to diversity (e.g., ability, cultural, racial, religious, gender, etc.).

S-W5

IDEAL ENVIRONMENTS

Brainstorm an ideal environment to enhance learning for a preschool child in either an itinerant or special class setting.

S-H13

FACTORS FOR AN IDEAL ENVIRONMENT

Special Class

The ideal environment for a special class would include the following:

1. Supportive trained and volunteer adults.
2. Adaptive equipment to meet the needs of the individual students.
3. Adaptable tables, chairs, counter, etc.
4. A colorful room including students' works.
5. A classroom which is decentralized rather than arranged in straight rows of desks or tables and chairs.
6. A large number of learning centers.
7. An outdoor area or an indoor large motor area.
8. A great variety of experiences available in the creative, intellectual, artistic, and physical areas.
9. Children learning by observing, imitating, and teaching one another.
10. A variety of materials, supplies, and equipment for children to work with to accommodate different ages, abilities/disabilities, and interests.

Itinerant Service

The ideal environment for an itinerant setting would include the following:

1. Supportive trained adults.
2. An appropriate group size for student and lesson (i.e. large group, small group, integrated group, or individual).
3. An appropriate classroom size (i.e. large classroom for large groups, gross motor activities, or a variety of learning areas, or small class for individual guidance or small group).
4. Accessibility to typically developing children.
5. An appropriate work space for the child.
6. If the teacher has access to a large room, set up a variety of learning centers.
7. An access to an area where large motor activities can be performed.
8. A great variety of experiences available in the creative, intellectual, artistic, and physical areas.
9. A variety of materials, supplies and equipment for children to work with to accommodate different ages, abilities/disabilities, and interests.
10. An overall area which is conducive to the child's learning level.

LEVEL: STAFF

GOAL: **#2** Gain competency in the concept of developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

COMPETENCY TYPE: SKILL *(continued)*

OBJECTIVE: Participants will develop plans for an environment that provides for the needs of the preschooler with disabilities and the preschooler who is typically developing especially as it relates to a child's growth in personal control.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Large group activity Describe a typical home setting and factors that can be manipulated to enhance the development of self-control in young children.	2. Worksheet/Transparency (S-W6) *Typical home setting* Handout/Transparency (S-H14) *Description of a typical home setting*	2. Participants describe a home setting and factors that can be manipulated and then compare it to the information sheet. Discuss how these factors might influence a young child's behavior. The list is not exhaustive and the leader may wish to add own experiences. Ask how issues of diversity (e.g., ability, cultural, racial, religious, gender, etc.) might influence the home environment.

S-W6

TYPICAL HOME SETTING

Describe a typical home setting and factors that can be controlled.

DESCRIPTION OF A TYPICAL HOME SETTING

1. Only one parent home at a time.
2. Siblings and friends within the home
3. Phone ringing or door bell ringing.
4. Toys are on the floor, couch, chair, or table.
5. Parent is occasionally wandering from room to room.
6. Adult conversation in other rooms or the same room as the teacher and child.
7. If working in the kitchen area, the children are then reminded of food.
8. Siblings or other parents watching television or listening to the radio within hearing distance of teacher and child.
9. Pet at varying degrees of control.
10. Children's work is displayed in various locations within the home

LEVEL: STAFF

GOAL: **#2** Gain competency in the concept of developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

COMPETENCY TYPE: SKILL *(continued)*

OBJECTIVE: Participants will develop plans for an environment that provides for the needs of the preschooler with disabilities and the preschooler who is typically developing especially as it relates to a child's growth in personal control.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
3. Large group activity Describe some equipment/materials from home that could be used. What could a teacher take into a home setting?	3. Handout/Transparency (S-H15) *Equipment/Materials From Home and Their Use* (Schickedanz) Worksheet (S-W7) *What to Take to a Home Setting*	3. The leader may wish to use both as a Transparency and Handout or just a Handout as time allows. Sharing of materials for use may prove extremely useful to staff. Note how issues of diversity (e.g., ability, cultural, racial, religious, gender, etc.) might influence the types of materials that can be taken into a home. Also discuss how teachers might share with parents the influence that the home environment and materials may have on their child's behavior.

S-H15

EQUIPMENT/MATERIALS FROM HOME AND THEIR USE

DRAMATIC PLAY — Imaginary play with no set rules

- Telephone book
- Empty food, toiletry, and cleaning containers
- Cookbook
- Stationery and Envelopes
- Magazines and Newspapers
- Food Coupons and Store Ads
- Maps and Atlas
- Games that could be played:
  - House
  - Grocery Store
  - Transportation
  - Office
  - Doctor's office
  - Restaurant
  - Post Office

Adapted from: Schickendanz, J.A. (1982). *More than the abc's: The early stages of reading & writing.* Washington: National Association for the Education of Young Children.

LANGUAGE DEVELOPMENT AND LITERACY
Expressive and/or receptive language

- Books
- Cookbook
- Empty food, toiletry, and cleaning containers
- Magazines and Newspapers
- Food Coupons and Store Ads
- Maps and Atlas
- Rice, flour, or cornmeal (could be used as sand or also for texture)
- **Any talking to a child can be considered language learning.

Adapted from: Schickendanz, J.A. (1982). *More than the abc's: The early stages of reading & writing.* Washington: National Association for the Education of Young Children.

S-H15

COGNITIVE DEVELOPMENT

- Build with Blocks
- Measure Sand, Water, or Ingredients for Cooking
- Observe Changes in the Environment
- Work with Wood and Tools
- Sort Objects for a Purpose
- Explore Animals, Plants, Water, Wheels, and Gears
- Sing and Listen to Music from Various Cultures
- Draw, Paint, and Work with Clay

(All of the cognitive development equipment/materials were taken from the book *Developmentally Appropriate Practice in Early Childhood Programs Serving Children From Birth Through Age 8, NAEYC*).

Adapted from: Schickendanz, J.A. (1982). *More than the abc's: The early stages of reading & writing.* Washington: National Association for the Education of Young Children.

GROSS MOTOR

- Roller Skates
- Big Wheels
- Tricycles
- Bicycles
- Balls — catching, throwing, bouncing, or kicking
- Swing Sets
- Jump Rope
- **Anything that involves the movement of arm and/or legs.

Adapted from: Schickendanz, J.A. (1982). *More than the abc's: The early stages of reading & writing.* Washington: National Association for the Education of Young Children.

S-H15

FINE MOTOR

Scissors

Crayons

Paints

Any Type of Dough

Cookie Cutters

Markers

Blocks

Puzzles

**Anything the child needs to use their fingers or hands.

Adapted from: Schickendanz, J.A. (1982). *More than the abc's: The early stages of reading & writing.* Washington: National Association for the Education of Young Children.

S-W7

WHAT TO TAKE TO A HOME SETTING

List materials/equipment a teacher could take into a home setting.

LEVEL: STAFF

GOAL: #2 Gain competency in the concept of developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

COMPETENCY TYPE: SKILL *(continued)*

OBJECTIVE: Participants will develop plans for an environment that provides for the needs of the preschooler with disabilities and the preschooler who is typically developing especially as it relates to a child's growth in personal control.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
4. Small group activity Describe the role of parents in setting the stage for success in either itinerant or special class setting.	4. Worksheet/Transparency (S-W8) *Role of Parents* Handout (S-H16) *Describing role of parent(s) in setting of the stage for success* (Maker; Marion)	4. List five roles of parents. The leader may wish to use the Worksheet/Handout as a Transparency to write down a few of the group's answers as they come back together. Participants should be encouraged to take notes for further use. Note how sensitivity to diversity (e.g., ability, cultural, racial, religious, gender, etc.) will be critical to successful parent/professional collaboration. Have participants discuss how this collaboration can support the development of self-control in young children. Please refer to *Family Collaboration* module in this set for further information.

S-W8

ROLE OF PARENTS

List at least five roles of parents in setting the stage for success.

1.

2.

3.

4.

5.

DESCRIBING THE ROLE OF PARENT(S) IN SETTING THE STAGE FOR SUCCESS

1. Be a supportive adult
2. Use appropriate processes to influence children
    a. Modeling
    b. Direct instruction/coaching
    c. Use of reinforcement and feedback
    d. Managing the child's environment
        - providing or not providing physical materials
        - time schedule
        - stated expectations of desired behaviors
3. Use positive methods of verbal control
    a. Suggestions
    b. Command when needed
    c. Short sentences and concrete words
    d. Child asked to restate what was said
    e. "No-choice" statements
4. Use appropriate nonverbal cues
    a. Touch of an arm
    b. Look directly at child without being threatening
    c. Point at area needing child's help
    d. Physically guide child to area
    e. Demonstrate "picking up"
    f. Point to area toys are to be put
5. Give clear and explicit information and instructions
    a. State all rules
    b. Give short instructions
    c. Give explicit instructions
    d. Tell child only what to do

Adapted from: Marion, M. (1991). *Guidance of young children*. New York: MacMillan. pp. 10-28.

6. Remain firm with rules and expectations
7. Work cooperatively with preschool teacher(s)
8. Show support in all age-appropriate and individually-appropriate actions and behaviors
9. Have an understanding of the difference between an abstract concept and a concrete concept
    a. The **concrete concept** is the first to develop in children. This concept is seen. Most people are able to agree on their properties or existence.
    b. The **abstract concept** is last to develop in children. This concept would include concepts which few people can agree on their meaning, such as love or hate.

Adapted from: Maker, C. J. (1982). *Curriculum development for the gifted*. Rockville MD: Aspen Systems. p. 19.

LEVEL: STAFF

GOAL: **#2** Gain competency in the concept of developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

COMPETENCY TYPE: VALUE/ATTITUDE

OBJECTIVE: Participants will develop a philosophy of environment that provides for emerging self-control in children.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Individual or small group activity Participants will have the opportunity to prioritize the components of a preschool environmentally sound setting for development of self-control by writing their philosophy on how the environment effects learning.	1. Worksheet (S-W9) *My Philosophy*	1. Given the group and time, the leader may wish to have the group divide into groups of three or four or have them work individually. Participants write their philosophy on how the environment effects learning, including the development of self-control in young children. Remind them to reflect on the needs of young children with disabilities and other issues of diversity as they write their philosophy. Discussion or sharing of a few philosophy statements can provide a closing activity. Participants should be encouraged to review their own philosophy and add to it.

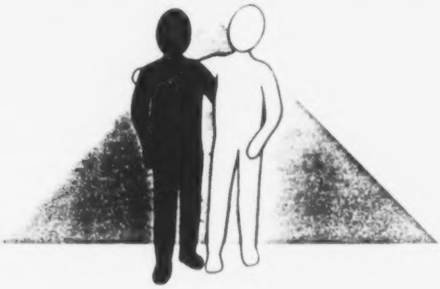
S-W9

MY PHILOSOPHY

Listing all of the given information and your previous experiences, write **your** philosophy on how the environment effects learning.

GOAL 3

Managing Behaviors



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LEVEL: STAFF

GOAL: #3 Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: KNOWLEDGE

OBJECTIVE: A. Participants will discuss emerging self-control in the young child.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Participants will read definitions of self-control.	1. Handout/Transparency (S-T9) *Self-Control*	1. Discussion may not be necessary, but it is important that participants focus on self-control. The following activities act as a review of self-control as it involves the younger child. Staff who work with older children may need to spend time relating to the younger child's stage in the acquisition of self-control.

S-T9

SELF-CONTROL

The act, power, or habit of having one's faculties or energies under control of the will.

Standard College Dictionary (1963). New York: Harcourt.

Self-control is voluntary and internal regulation of behavior.

Marion, M. (1987). *Guidance of Young Children*. New York: MacMillan.

LEVEL: STAFF

GOAL: #3 Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: A. Participants will discuss emerging self-control in the young child.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Large group activity Leader will present three Transparency/Handouts that can be used to understand self-control as it develops. A discussion should be focused on the Handouts.	2. Transparency/Handout (S-T10, 11 and 12) Flavell quote *Self-control* — Marion *The Evolution of Self-Control*	2. These Handouts should be self-explanatory. Discussion can be lead, as needed, for the group. Discuss how a disability might influence the development of self-control in a young child.

S-T10

"SELF-CONTROL, OR SELF-REGULATION, MAY WELL BE ONE OF THE MOST SIGNIFICANT CHANGES DURING A CHILD'S PRESCHOOL YEARS."

Flavell, J. H. (1977). *Cognitive development.* Englewood Cliffs, NJ: Prentice-Hall.

SELF-CONTROL

Self-control is an integral part of the learning process and extremely important to the child's growth and development. Children demonstrate self-control when they:

CONTROL IMPULSES

WAIT

SUSPEND ACTION

TOLERATE FRUSTRATION

INITIATE A BETTER PLAN

CARRY OUT A BETTER PLAN OVER A PERIOD OF TIME

Marion, 1991.

THE EVOLUTION OF SELF-CONTROL

IT EVOLVES FROM THE OUTSIDE TO THE INSIDE

IT DEVELOPS SLOWLY

Kopp (1981) describes the development of self-control as a five step process beginning with birth. At about 36 months a child should be at the fourth step which he describes as advanced self-control. During this step children begin to use strategies that help them delay. Younger children do not use delaying methods automatically. They need to be instructed in ways to do this.

IT DEVELOPS HALTINGLY

It should be expected that a young child may exhibit well-developed self-control at one moment and little control at another. They need to practice self-control just as they need to practice many other skills. Adults should not expect perfect self-control.

LEVEL: STAFF

GOAL: #3 Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: B. Participants will describe preventative approaches to managing behavior that are child-centered and describe how these lead to success for the preschooler.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Participants will be given a description of each preventative approach to behavior management included in this module and will read them for further use in these activities. Discussion can be initiated.	1. Handout/Transparency (S-H17, S-T13) *Preventative Approach to Managing Behavior and Reactive Approach to Managing Behavior* Handout (S-H18) *Preventative Approaches to Managing Behavior for Self-Control*	1. Participants should realize the planning required for preventative approaches to be in place for success to occur. Be sure to note how these preventative approaches facilitate the development of self-control in young children. The concept of the "rightness" of children's behavior is important to emphasize at this point. Some reference to the developmental stages of children at ages 3-5 may need to be reviewed. Developmental information is available in Goal 1.

PREVENTATIVE APPROACH TO MANAGING BEHAVIOR

To ensure success in the child's behavior, adults will set the stage for an environment that is child-centered, based on developmentally appropriate activities, expectations, and techniques, and organized to address positive discipline. The development of self-esteem, appropriate interactions with adults and peers, systematic interventions, and communication is essential in a preventative approach.

Positive Discipline: Any adult disciplinary practice that treats children with respect and dignity. It is a child-centered, unselfish approach, focusing on what a child needs and not so much on what an adult wants or needs.

Baltes, P. B. and Brim, O. G. (Eds.) (1982). *Lifespan development and behavior.* "Self-control and continuity from childhood to adolescence." (Vol. 4). New York: Academic Press.

REACTIVE APPROACH TO MANAGING BEHAVIOR

To attempt to manage behaviors after they occur instead of setting the stage for preventative techniques to be in place so that inappropriate behaviors will not occur.

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PREVENTATIVE APPROACH TO MANAGING BEHAVIOR

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Baltes, P. B. and Brim, O. G. (Eds.) (1982). *Lifespan development and behavior.* "Self-control and continuity from childhood to adolescence." (Vol 4). New York: Academic Press.

REACTIVE APPROACH TO MANAGING BEHAVIOR

To attempt to manage behaviors only after they occur instead of setting the stage for preventative techniques to be in place so as to minimize the occurrence of inappropriate behaviors.

PREVENTATIVE APPROACHES TO MANAGING BEHAVIOR FOR SELF-CONTROL

SOCIAL COMPETENCE

The ability of a child to interact in a socially acceptable manner that is developmentally appropriate.

ENHANCED SELF-ESTEEM

Self-esteem is the way one feels about one's self. Encouragement, based on a warm, positive relationship with adults that is given by any adult coming in contact with a child, will develop and strengthen self-esteem. Self-esteem development is facilitated by respecting, accepting, and comforting children regardless of the child's behavior.

SYSTEMATIC INTERVENTION

A strategy to teach and manage appropriate behaviors that is developmentally appropriate, professionally ethical, and planned in advance.

COMMUNICATION SKILLS

Receptive and expressive language skills that allow a child to respond across setting. For the child with a language disability, an alternate approach may be necessary. Adults encourage the development of language skills by speaking clearly and frequently and by listening actively. An understanding of a child's language skills facilitates management of behavior.

LEVEL: STAFF

GOAL: **#3** Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: B. Participants will describe preventative approaches to managing behavior that are child-centered and describe how these lead to success for the preschooler.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Individual and large group activity Participants will show an understanding of each approach by responding to a yes/no response sheet that describes events in a classroom to determine if they are preventative approaches or reactive approaches.	2. Worksheet/Transparency (S-W10) *Yes/No* response sheet for individual decisions See answer sheet provided	2. Review responses to reach agreement. Discussion about the reason for responses can be generated. Note how reactive approaches may foster inappropriate or acting out behavior in young children.

S-W10

PREVENTATIVE APPROACH: YES-NO

DIRECTIONS: After reading each of the following statements, answer yes or no to the following question:

Is this an example of a preventative approach to behavior management?

YES NO 1. Joe returns to the circle when the lights are flicked.

YES NO 2. "Maria, you should not have brought that toy to school today."

YES NO 3. Children come into the room, immediately put their belongings away and go to the circle.

YES NO 4. Children sit at their individual desks doing worksheets as an adult tells them to be quiet.

YES NO 5. "Can't you remember to tell your mother to send your shoes on the day we go to the gym?"

YES NO 6. Children are expected to share conversation as they work on a project at the table.

YES NO 7. There is a chart on the wall that lists with pictures the activities that are available for today.

YES NO 8. Two boys help each other put away the blocks when told that play time will be over in five minutes.

YES NO 9. The adult gives directions and expects the child to respond immediately.

YES NO 10. "Joshua, you finished cleaning your area quickly. Now you have time to look at the book."

YES NO 11. Suzy takes a toy from her friend. The adult makes them both return to the circle while other children continue to play.

YES NO 12. Children who misbehave are required to sit in a chair (time-out) for 30 minutes.

YES NO 13. The adult smiles and pats the girl on the arm when she completes a task.

PREVENTATIVE APPROACH: YES-NO

DIRECTIONS: After reading each of the following statements, answer yes or no to the following question:

Is this an example of a preventative approach to behavior management?

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YES [✓ NO] 2. "Maria, you should not have brought that toy to school today."

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YES [✓ NO] 4. Children sit at their individual desks doing worksheets as an adult tells them to be quiet.

YES [✓ NO] 5. "Can't you remember to tell your mother to send your shoes on the day we go to the gym?"

[✓ YES] NO 6. Children are expected to share conversation as they work on a project at the table.

[✓ YES] NO 7. There is a chart on the wall that lists with pictures the activities that are available for today.

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YES [✓ NO] 9. The adult gives directions and expects the child to respond immediately.

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LEVEL: STAFF

GOAL: **#3** Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: B. Participants will describe preventative approaches to managing behavior that are child-centered and describe how these lead to success for the preschooler.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
3. Small group activity Participants will select child-centered management styles.	3. Handout/Transparency (S-H19, S-T14) *Styles of Management* Handout/Transparency/Worksheet (S-H20, S-T15, S-W11) *Styles of Management — Do They Lead to Self-Control?* *Worksheet/Transparency (S-W12)* *Preventative Approaches vs. Reactive Approaches* Worksheet to use in making notes to clarify the difference between reactive and preventative approaches to child management.	3. Group may analyze their own management type in a school setting or as a parent. The style most conducive to the growth of self-control and positive self-concept is the *authoritative* style. Assign to groups or handle in the whole group with questions to elicit response as to whether preventative or reactive approaches are a part of the situation. Discussion should develop the concept that preventative approaches lead to self-control. Children have the opportunity to make choices when a preventative approach is used. They need to be aware of the results of their choices. Make a chart on the board or Transparency of preventative approaches vs. reactive. Discussion about the advantages of the preventative approach may be indicated during this activity.

STYLES OF MANAGEMENT

THE AUTHORITARIAN STYLE

- Attempt to shape, control, and evaluate the attitudes and behaviors of children according to an adult-established set of standards
- Great value is placed on obedience, order, and completed work
- Demands are placed on children
- Individuality and independence are discouraged

THE PERMISSIVE STYLE

- Children are allowed to make their own decisions whenever possible and to regulate their own behavior
- There are few rules
- Few demands are made
- There are few restrictions or punishments
- Tolerance toward children's impulses

THE AUTHORITATIVE STYLE

- Clear standards and expectations for mature behavior are set
- Rules are enforced and sanctions used when indicated
- Children are encouraged to be independent and express individuality
- Open communication exists to express points of view
- Children and adult rights are recognized

Marion, M. (1991). *Guidance of young children.* New York: MacMillan. pp. 7-9.

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STYLES OF MANAGEMENT — DO THEY LEAD TO SELF-CONTROL?

1. Children are working individually at the table on an art project. The teacher is working her way around the table helping individual children with the activity. When she sees that several are not following the directions, she stops the group, stands in front of the table and restates the directions. They start again. A child asks a question; she tells him how to do it. He does not reattempt the task. She tells him that he will have to leave the table if he cannot do the project.

2. Four children are working cooperatively on a sorting task on the floor. Jenny is not actively participating in the task, but is watching the other children. The aide kneels down beside the group, hands an object to Jenny and asks her if she knows which pile it goes into. When Jenny puts it into a pile, the children tell her that she helped them. The teacher encourages her to pick another.

3. A schedule for the day is posted on the wall. It includes words, clock faces, and pictures. The children are just finishing the sharing time. The last child is finishing his chance to share his weekend trip to the zoo. He excitedly starts telling about a disagreement that he witnessed between two neighbor boys. The teacher looks at the clock and says they must finish because it is time for a story.

4. A schedule is posted on the wall including words, clock faces, and pictures. As share time continues, it is apparent that the children are actively involved in each other's "news events." The teacher looks at the clock and says to the children, "If you look at the schedule and the clock, you will see that we planned to be finished with "news," but I can see that we have a lot to share today. Let's continue for a bit longer so that each of you can share. We will have a story later on this morning. Is that all right with you?"

5. Each child has a goal chart for stickers. The goal chart goes home each day. Good days are posted on a class chart. There are varied degrees of success. Goals are geared toward completion of work papers and following a set of structured rules that are posted on the wall.

6. Learning centers are assigned on a daily basis. Each child gets a chance to be in each center once each week.

7. Jen Ming is working with a small group of children. He leaves the group and goes to his favorite corner to play with the Legos. The teacher tells him to return to the group and play with the other children.

8. A child who rarely converses with other children chooses to talk during story time. The adult says that he must be quiet so that the other children can hear.

9. A child is crying because another took his toy. The child who took the toy is punished and the other child is told that he can have the toy.

STYLES OF MANAGEMENT — DO THEY LEAD TO SELF-CONTROL?

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STYLES OF MANAGEMENT — DO THEY LEAD TO SELF-CONTROL?

PREVENTATIVE APPROACHES VS. REACTIVE APPROACHES

Preventative	Reactive

LEVEL: STAFF

GOAL: **#3** Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: SKILL

OBJECTIVE: Participants will demonstrate techniques for each of the preventative approaches presented.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Small group activity Participants will be divided into groups to quickly develop and present techniques that demonstrate understanding of the basic philosophy underlying one of the preventative approaches. Each group will present a different technique using information from the Handouts and their own experiences.	1. Worksheet/Handout/Transparency (S-W13, S-H21, S-T16) (S-H22, S-T17) *Techniques to use to Build Social Competency* *Techniques to use to Build Self-Esteem* Handout (S-H23 and 24) *Self-Esteem* *Ways to Enhance the Growth of Self-Esteem* Handout/Transparency (S-H25, S-T18) *Systematic Intervention* Handout/Transparency (S-H26, S-T19) *Teach Socially Acceptable Ways*	1. Divide the whole group into four groups, one for each of the four approaches. Assign or accept volunteers to develop techniques that relate to a particular approach. Definitions from previous activity can be used for reference. Each group should use the appropriate page for notes. Other pages can be used for group notes. Ask participants to note how these strategies foster the development of self-control in young children. Also discuss how techniques can reflect a sensitivity to other types of diversity (e.g., ability, cultural, racial, religious, gender, etc.). Leader should use Transparency to list responses.
2. Participants will critique each group's presentation in terms of understanding, use, developmental appropriateness, exceptionality appropriate, and sensitivity to other types of diversity.	*Systematic Intervention* (S-H27 and 28, S-T20) *Basic Principles of Effective Management* (S-H29, S-T21) Handout (S-H30) *Communication Skills*	2. Each group will present techniques selected. Others will be invited to comment and/or add to each presentation. Each participant should use notesheets for this activity for further reference as participants gather techniques. Additional notes regarding disability modifications should be made on each sheet.

TECHNIQUES TO USE TO BUILD SOCIAL COMPETENCY

TECHNIQUES TO USE TO BUILD SELF-ESTEEM

S-W13

SYSTEMATIC INTERVENTION TECHNIQUES THAT FOSTER PREVENTATIVE APPROACHES TO MANAGING BEHAVIOR

S-W13

TECHNIQUES OF COMMUNICATION THAT FOSTER PREVENTATIVE APPROACHES TO MANAGING BEHAVIOR

SOCIAL COMPETENCE

Some techniques/principles that foster the development of social competence in the 3- through 5-year-old child are included in this Handout.

1. Adults support 3-year-olds' play and developing independence, helping when needed, but allowing them to do what they are capable of doing and what they want to do for themselves.

2. Adults recognize that, although 3-year-olds are usually more cooperative than toddlers and want to please adults, they may revert to toddler behavior (thumb-sucking, crying, hitting, baby talk) when they are feeling shy or upset, especially in new situations. Adults know that 3-year-olds' interest in babies, and especially their own recent infancy, is an opportunity for children to learn about themselves and human development.

3. Adults provide many opportunities for 3's to play by themselves, next to another child (parallel play), or with one or two other children. Adults recognize that 3-year-olds are not comfortable with much group participation. Adults read a story or play music with small groups and allow children to enter and leave the group at will.

4. Adults encourage children to take turns and share but do not always expect children to give up favored items.

5. Adults provide large amounts of uninterrupted time for children to persist at self-chosen tasks and activities and to practice and perfect their newly developed physical skills if they choose.

6. Adults know that preschoolers do not usually understand or remember the rules. Guidance reasons that are specific to a real situation and that are demonstrated repeatedly are more likely to impress young children.

7. Teachers facilitate the development of self-control in children by using positive guidance techniques such as modeling and encouraging expected behaviors, redirecting children to a more acceptable activity, and setting clear limits. Teacher's expectations match and respect children's developing capabilities.

8. Children are provided many opportunities to develop social skills such as cooperating, helping, negotiating, and talking with the person involved to solve interpersonal problems. Teachers facilitate the development of these positive social skills at all times.

9. Adults provide affection and support, comforting children when they cry and reassuring them when fearful. Adults plan experiences to alleviate children's fears.

From: *Developmentally Appropriate Practice in Early Childhood Programs Serving Children From Birth Through Age 8.* NAEYC 1987.

S-T16

SOCIAL COMPETENCE

Some techniques/principles that foster the development of social competence in the 3- through 5-year-old child.

1. Adults allow children to do what they are capable of doing and what they want to do for themselves.
2. Adults know that 3-year-olds' interest in babies, and especially their own recent infancy, is an opportunity for children to learn about themselves and human development.
3. Adults provide many opportunities for 3's to play by themselves, next to another child (parallel play), or with one or two other children.
4. Adults encourage children to take turns and share but do not always expect children to give up favored items.
5. Adults provide large amounts of uninterrupted time for children to persist at self-chosen tasks and activities and to practice and perfect their newly developed physical skills if they choose.
6. Adults know that preschoolers do not usually understand or remember the rules. Guidance reasons that are specific to a real situation and that are demonstrated repeatedly are more likely to impress young children.

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8. Children are provided many opportunities to develop social skills such as cooperating, helping, negotiating, and talking with the person involved to solve interpersonal problems. Teachers facilitate the development of these positive social skills at all times.

9. Adults provide affection and support, comforting children when they cry and reassuring them when fearful. Adults plan experiences to alleviate children's fears.

S-H22

ENHANCED SELF-ESTEEM

The process of developing an identity and self-image begins at birth. The security a baby feels through closeness and warmth with parents is the beginning of the growth of self-esteem. As a child grows and develops, the child's self-image comes from other people. It depends on feeling loved by parents and other adults in its life. When a child attends school, it is the teacher and other school staff who take the place of the parent for that portion of the day. If the child is to feel competent and develop positive self-esteem, the adults at school must assist the child to like himself and value his accomplishments. Research indicates that the success that children have in school is almost always dependent on high self-esteem and positive self-worth.

S-T17

ENHANCING SELF-ESTEEM

- Communicate confidence in children — allow them to make mistakes.
- Arrange the environment for variety.
- Show affection.
- Allow children to show feelings.

S-H23

SELF-ESTEEM

Ellie Kahn, a child therapist, lists the following ways to enhance self-esteem based on her work with children and families. The same methods apply to the school setting.

SHOW UNCONDITIONAL LOVE AND ACCEPTANCE
EXPRESS ANGER RESPONSIBLY
MAKE CLEAR REQUESTS
LEARN TO LISTEN
TAKE A CHILD'S FEELINGS SERIOUSLY
VALIDATE THE CHILD'S EXISTENCE
FIND SOMETHING TO APPRECIATE DAILY
SPEND TIME ALONE WITH A CHILD
ALLOW CHILDREN TO DO THINGS INDEPENDENTLY
RESPECT THE CHILD'S POSSESSIONS
ACKNOWLEDGE THE CHILD'S ABILITIES
RESPECT A CHILD'S CHOICES
TEACH CHILDREN THAT THEY ARE NOT ONLY THEIR BODY
EXPRESS LOVE NONVERBALLY
SPEAK TO A CHILD AT EYE LEVEL
AVOID MIXED MESSAGES
SHARE FEELINGS WITH A CHILD
FOCUS ON EACH CHILD'S UNIQUENESS

From: Kahn, E. (1990). "Strong Feelings of Self-Esteem Fuel a Child's Ability to Learn, to Love, and to Create." *Parents.* pp. 96-100.

WAYS TO ENHANCE THE GROWTH OF SELF-ESTEEM

1. Base expectations on appropriate child development theory.
2. Communicate confidence in children by believing in them; say something encouraging or complimentary each day.
3. Allow children to make mistakes and tolerate their less than perfect efforts at new tasks or challenges.
4. Arrange the environment for children to be involved in a variety of activities and roles.
5. Reward behaviors that are to be continued; find positives in children's behavior to emphasize even when a behavior or task has not been totally successful.
6. Ignore errors that are minor or those which will change with developmental growth and experience.
7. Show affection through physical contact or closeness; tell children in words that you like them.
8. Praise in public, but reprimand in private.
9. Learn how to let every child feel special.
10. Allow children to have plateaus, set-backs, or regressions.
11. Gradually introduce children to new experiences to help prevent fears of failure.
12. Don't feel compelled to lecture or teach lessons at every opportunity.
13. Acknowledge what children are feeling; do not judge, blame, or criticize children for their feelings.
14. Avoid mixed messages.
15. Be honest when communicating.
16. Use "I" messages rather than "you" messages.
17. Be a good listener.
18. Do not make children feel small, unworthy, or inadequate.
19. Help children solve problems by themselves.
20. Treat each child fairly.
21. Avoid power struggles.
22. Model positive self-esteem.

SYSTEMATIC INTERVENTIONS

Some systematic intervention techniques/principles that foster the development of self-control in children aged three through five are included on this handout.

HELP CHILDREN LEARN TO RESTRAIN UNSOCIAL IMPULSES

- Short term methods of controlling behavior:
    1. Redirect the child to more positive behavior; remind the child of more positive behavior and the consequences for violating it.
    2. Remove the child from the activity calmly and promptly.
    3. Briefly discuss the child's feelings and the rules at that moment and at greater length at another time.
    4. Allow the child to determine when he is ready to return to the activity.
    5. Help the child return and be more successful in an acceptable way.
    6. When all else fails, take firmer action such as no chance to return to the activity involved or separation from another child.
    7. Comment favorably on regained self-control as soon as possible.
- Long term method for building inner controls:
    1. Analyze the reasons for repeated misbehavior and correct or prevent such conditions when possible.
    2. When such situations happen again and again, change the situation rather than nag the child.
    3. Take individual needs into account.
    4. Realize that children misbehave sometimes because of problems or crisis at home.
    5. Warn ahead.
    6. Tell children what they should do; that is, provide positive instructions instead of negative or neutral ones.
    7. Be alert to potential difficulties and step in before a problem occurs.
    8. Make a point of recognizing good behavior and commending it from time to time — catch the child being good.
    9. Convey a sense of warmth along with firmness.
    10. Be reasonable.
    11. Be a good example.
    12. Profit by experiences — both adult and child.

SYSTEMATIC INTERVENTIONS

Help Children to Restrain Unsocial Impulses

REDIRECT

REMOVE

DISCUSS

WAIT

RETURN

SEPARATE IF NECESSARY

COMMENT ON REGAINED SELF-CONTROL

TEACH CHILDREN SOCIALLY ACCEPTABLE WAYS OF GETTING WHAT THEY WANT

1. Watch for the teachable moment.
2. Teach children how to ask for something that another child is using including how to wait until that child is done. Teach them what to do as they wait for their turn.
3. Teach children how to trade one item for another.
4. Teach children how to compromise and negotiate.
5. Teach children how to substitute.
6. Teach children how to play cooperatively through modeling.
7. Teach children how to verbalize alternatives.
8. Show approval when children use these alternative.
9. Help children respond generously.
10. Teach children how to stand up for their own rights.

From: Hendrick. (Citation, p. 119).

TEACH CHILDREN SOCIALLY ACCEPTABLE WAYS OF GETTING WHAT THEY WANT

- Teachable Moment
- Teach Children How to —
  - TRADE
  - COMPROMISE
  - SUBSTITUTE
  - PLAY COOPERATIVELY
  - VERBALIZE ALTERNATIVES
  - STAND UP FOR OWN RIGHTS

From: Hendrick. (Citation, p. 119).

HOW TO INCREASE A CHILD'S ABILITY TO MAKE FRIENDS

1. Recognize individual personalities of children.

2. Help children recognize the effect of inappropriate behaviors such as temper tantrums, taking other's possessions or toys, or physical outburst. Talk to them about the issue when they are calm.

3. Pair children for activities or experiences. Change pairings.

4. Look for common interests for matching children.

5. Help children cope with rejection.

From: Hendrick. (Citation, p. 119).

INCREASE THE CHILD'S ABILITY TO FUNCTION SUCCESSFULLY AS PART OF A GROUP

1. Use play situations to help children develop group social skills.
2. Know when to prolong or extend a situation that is positive.
3. Use mealtime or snack time to foster social competence
4. Use group time to foster social competence.

ENCOURAGE THE CHILDREN TO FIND SATISFACTION IN HELPING EACH OTHER AND THE GROUP

1. Children can provide comfort to others.
2. Older children can benefit from helping younger children.
3. Meaningful work offers opportunities for helping.

From: Hendrick, J. (1986). *Total Learning: Curriculum for the young child.* Columbus OH: Merrill.

SYSTEMATIC INTERVENTIONS

- INCREASE A CHILD'S ABILITY TO MAKE FRIENDS
- INCREASE A CHILD'S ABILITY TO FUNCTION SUCCESSFULLY AS PART OF A GROUP
- ENCOURAGE CHILDREN TO FIND SATISFACTION IN HELPING EACH OTHER AND THE GROUP

BASIC PRINCIPLES OF EFFECTIVE MANAGEMENT

1. Teachers need a workable management system in order to teach.

2. The goal of management is the cooperation of children in learning activities, not control over children.

3. Children who are engaged in meaningful learning activities are not likely to misbehave.

4. Children are likely to behave if they understand and accept the rules.
   - Decide on a few rules in the children's language
   - Teach the rules
     1. Clearly describe the rules including examples of the desired behavior.
     2. Precisely identify the situations to which the rules apply.
     3. Model the desired behavior and have the children model the behavior.
     4. Provide many opportunities to practice the desired behavior.
     5. Give consistent feedback on how the rules are being followed.
   - Change the rules when indicated.

ONCE THE RULES ARE IN PLACE:

1. Make lessons meaningful and developmentally appropriate.

2. Group children appropriately.

3. Get and keep children's attention when needed.

4. Signal transitions in advance; minimize waiting.

5. Establish routines; supervise all children systematically.

6. Project an image of confidence, firmness, and control with warmth.

7. Ignore minor misbehaviors and model desirable behaviors.

8. Recognize continued minor misbehaviors.

9. Respond to major misbehaviors.

10. Avoid punishment whenever possible.

Schickendanz, J., York, M., Stewart, I. S., & White, D. (1990). *Strategies for teaching young children.* Englewood Cliffs, NJ: Prentice-Hall. pp. 61-80.

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        1. Clearly describe the rules including examples of the desired behavior.
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        3. Model the desired behavior and have the children model the behavior.

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5. Give consistent feedback on how the rules are being followed.

- Change the rules when indicated.

Schickendanz, J., York, M., Stewart, I. S., & White, D. (1990). *Strategies for teaching young children.* Englewood Cliffs, NJ: Prentice-Hall, pp. 61-80.

COMMUNICATION SKILLS

Children acquire communication skills through hearing and using language, and as adults listen and respond to what children say. Three-year-olds need to have adults speak clearly and frequently. Adults need to respond quickly and appropriately to children's verbal initiatives. Talking may be more important than listening for them. Adults should patiently answer "why" questions. Opportunities should abound to expand children's language. Children should have many opportunities to communicate among themselves.

When focusing on managing behavior, the adult must informally evaluate a child's level of receptive and expressive language. Frequently a child needs concrete examples or pictures to gain self-control. Children with delays in communication skills must be provided with alternatives to verbal instruction. They must be helped to communicate their needs and feelings. Negative behaviors can occur as the result of children's inability to communicate with other children and adults.

LEVEL: STAFF

GOAL: **#3** Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: SKILL *(continued)*

OBJECTIVE: Participants will demonstrate techniques for each of the preventative approaches presented.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
3. Large group activity Participants will discuss the use of systematic observations to help identify appropriate preventative methods when behavior problems persist for a child.	3. Transparency (S-T22) *Systematic Observation Questions* Handouts/Transparency (S-H31 and 32) *Sample Data Collection Form* *Sample Data*	3. Review Transparency and discuss how answering these questions might enable participants to identify preventative methods for resolving a behavior problem. Share the sample data collection form and the sample data Handout. Ask participants to discuss what the problem appears to be, based on the data. Ask them to describe how this situation might be resolved. Discuss how this type of observation requires a commitment of staff time — to observe and record information. Talk about how participants could conduct this type of observation within their programs.
4. Large group discussion Participants will discuss addressing behavior issues on the IEP.	4. Transparency (S-T23) *Writing IEP Objectives That Address Behavior Issues*	4. Discuss how behavior issues can be addressed on the IEP. Review points on Transparency. Ask the participants to generate an IEP objective for the following situation: – child throws toys at other children when they enter a play area in which she/he is playing. Sample objective: While playing at learning centers, the child will appropriately play beside other children (or will share toys). *(continued on next page)*

LEVEL: STAFF *(continued)*

GOAL: #3 Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: SKILL *(continued)*

OBJECTIVE: Participants will demonstrate techniques for each of the preventative approaches presented.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
		Finally, discuss the strategies one might use to actually teach this skill. Examples – Break skill into subparts (i.e., task analyze). – Prompt appropriate sub-skills. – Praise child for each small step. – Prevent inappropriate behavior by having an adult near the child to teach correct behavior and stop attempts at throwing toys.

SYSTEMATIC OBSERVATION QUESTIONS

1. How often does the child actually engage in the behavior?
2. How long does the behavior last?
3. Does the behavior always occur at a particular time of day (e.g., right before lunch, right after nap, at the end of the day)?
4. What happens right before the behavior occurs?
    - Is a particular activity occurring every time (e.g., child is at the water table)?
    - Are certain adults or children always around?
    - Did the child's parents just enter the room?
5. Exactly what does the child do that you don't like?
6. What happens right after the behavior occurs?
    - Do other children come to the child?
    - Is the child left alone?
    - Do adults talk to the child (even in a negative way)?
    - Does the child get to lie down and take a nap?

S-H31

SAMPLE DATA COLLECTION FORM

Date	Time	How long behavior lasts	Exact behavior	What happened before	What happened after

SAMPLE DATA COLLECTION FORM

Day and Date	Time	How long behavior lasted	Exact behavior	What happened before	What happened after
Tuesday 11/4	11:37	13 minutes	Angela cried and wandered around the room	Playing in dramatic play area with Janice; Janice picked up the fireman's hat	Behavior ended when teacher said it was time to eat lunch and asked the children to wash their hands
Friday 11/7	11:24	Off and on for 26 minutes	Angela cried and moved from one activity to the next	Playing at paint easel with Jamal; Angela wanted to paint on Jamal's picture and he would not let her	Teacher asked children to wash hands in preparation for eating lunch
Tuesday 11/11	11:45	5 minutes	Angela sat and cried	Angela wanted to play in the housekeeping area when there were already four children playing there	Same as previous times

S-T23

WRITING IEP OBJECTIVES THAT ADDRESS BEHAVIOR ISSUES

- Write objectives that state the positive behaviors you want the child to learn.

- Keep these objectives in the context of the curricular domains or daily routines (i.e., the “condition” for the behavior should reflect this context).

LEVEL: STAFF

GOAL: #3 Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: VALUE/ATTITUDE

OBJECTIVE: A. Participants will describe a working philosophy that provides preschool children with the opportunity to manage their behavior successfully.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Individual Participants will individually outline a working philosophy that provides for self-control development in young children.	1. Worksheet/Transparency (S-W14) *Notes on a Philosophy for Developing Self-Control Management* Definitions from the previous activities can be referred to during this activity.	1. Give participants a few minutes to outline a philosophy statement. Remind them to reflect on support for young children with disabilities and sensitivity to other types of diversity. Ask participants to share ideas. Encourage participants to evaluate their own outline and add or delete items as others share theirs.

NOTES ON A PHILOSOPHY FOR DEVELOPING SELF-CONTROL MANAGEMENT

Outline:

LEVEL: STAFF

GOAL: **#3** Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: VALUE/ATTITUDE *(continued)*

OBJECTIVE: B. Participants will prepare a statement of philosophy that could be presented to a parent group.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Small group activity Participants will define a philosophy statement concerning management techniques that can be shared with others (e.g., paraprofesionals, parents, etc.). They will list the types of material that should be included when describing the management techniques that will be employed in a preschool program.	1. Worksheet/Transparency (S-W15 and 16) *Philosophy for Presentation to a Group* *Additional Materials to Help in Group Presentation*	1. A philosophy statement for presentation to families should be brief, informative, and easily understood. Leader may wish to develop an example for group to critique prior to the beginning of this activity. It is hoped that each participant will complete a statement that can be used as they are involved with preschool activities. Examples of materials for philosophy presentation could range from samples of children's work to classroom charts to an Transparency. This is designed for a resource. Most staff are called upon to present a few minute talk occasionally — Open House, etc.

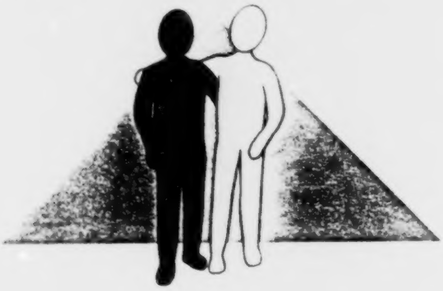
S-W15

PHILOSOPHY FOR PRESENTATION TO A GROUP

ADDITIONAL MATERIALS TO HELP IN GROUP PRESENTATION

GOAL 4

Managing Behaviors



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LEVEL: STAFF

GOAL: #4 Gain competency in knowing when and how to seek additional resources for managing behaviors that are beyond the scope of the school setting for individual child needs.

COMPETENCY TYPE: KNOWLEDGE

OBJECTIVE: Participants will discuss when additional resources are needed which may or may not be outside the public school setting.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Small group activity Participants will role-play a conference between classroom and administrative staff over multiple concerns about a student. Included will be discussion of what has been attempted, what is known about the child at home, and additional ideas that could be used at school.	1. Handout/Transparency (S-H33) *Toya* *Jose* Worksheet/Transparency (S-W17) *Role-play Conference*	1. Participants may be divided into small groups to review the given situation. After reviewing the given situation, the participants will take on the roles of classroom and administrative staff. Appoint a combative participant, if desired. The participants will role-play their concerns about behavior, attempts, home, and additional issues concerning the child. Discuss at what point additional support beyond the classroom staff should be sought. Groups may volunteer to present their conference to the entire group. Discuss the results.
2. Small group activity Follow up with a conference with the parent(s) about the school's concerns, seeking input from the parent(s).	2. Worksheet (S-W18) *Follow-up Conference*	2. Break into previous groups and role-play a conference between staff and parent(s). After a short period of time, groups may wish to role-play their conferences in front of the whole group. Pay particular attention to methods used in suggesting additional services to parents. Staff should be aware of the ramifications of recommendations to outside agencies. Discuss how sensitivity to diversity (e.g., ability, cultural, racial, religious, gender, etc.) is needed in this situation.

S-H33

TOYA

Toya, aged five, has average ability as demonstrated on various cognitive instruments. she was neglected at birth according to the Children Service case worker. She was removed from the home at age two. She is in temporary foster placement currently. Foster parents report that she needs a great deal of love. She will not play with her foster siblings or her classmates in the regular kindergarten class. She seems to be absorbing readiness skills and will respond to questions appropriately. She will not complete tasks given to her by the teacher even when they involve manipulatives. Instead, she sits in a chair and stares at the other children or plays by herself with the dolls. If another child comes to the housekeeping center, she puts the doll away and leaves.

JOSE

Jose is four years old. He lives in a single parent home with his mother; he does not see his father anymore because of a move. He does go to maternal grandparents during the day when not in his integrated preschool setting. Mother is gone from 6:30 a.m. until 6:00 p.m. Jose is developing very slowly compared to typical peers. His delayed cognitive skills are also affected by lack of speech. While it is recognized that he speaks while with grandparents, he does not use expressive language with his mother or at school. The school is using speech and sign with him. Mother does not know sign. Grandparents are very resistant to sign and are encouraging mother to demand its elimination. Jose is generally well-behaved, but does not interact with peers or teachers. He occasionally shows striking out behaviors while at school. This has not been noted at home.

ROLE-PLAY CONFERENCE

Review the given situation. As a group, assign members to play characters in a role-play for a conference between classroom and administrative staff. Within the role-play conference, the following should be considered:

Inappropriate behavior of student

What has already been attempted

What is known about the child at home

Additional ideas that could be used at school

S-W18

FOLLOW-UP CONFERENCE

Using the same situations and information gathered through the previous activity, role-play a conference with the parent about the school's concerns. Groups should keep in mind the importance of receiving input from the parent.

LEVEL: STAFF

GOAL: #4 Gain competency in knowing when and how to seek additional resources for managing behaviors that are beyond the scope of the school setting for individual child needs.

COMPETENCY TYPE: SKILL

OBJECTIVE: Participants will develop a resource data bank and the strategies necessary for suggesting its use to parents.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Have participants list resources within their school or agency that could assist with difficult behavior issues. Examples: – Other teachers – Administrators – Psychologists – Speech/Language Therapists (if behavior is caused by lack of communication skills) – etc. Given a list of possible outside resources, the participants will add names and telephone numbers appropriate to the location that can serve as a growing data bank of information.	1. Worksheets/Transparency (S-W20 and 21) *Internal Resources* *Data Bank of Outside Resources* Handouts (S-H34, 35, and 36) *Ohio Rehabilitation Services Commission for Ohioans* *National Resources* National Information Center for Children and Youth with Handicaps (NICHCY). *State Resources* National Information Center for Children and Youth with Handicaps (NICHCY)	1. The resources listed are a partial list and may have more than one location within participants location. The participants may wish to add to the given list. The leader may wish to refer to: *Ohio Rehabilitation Services Commission for Ohioans.* (#G-46) 400 E. Campus View Blvd., Columbus, OH 43235-4604 (1-800-282-4536) SERRC Centers provide many brochures and pamphlets pertaining to their region. They should be contacted for these. For Example: – Agency Handbook – Regional Resources – Summer Fun – The Bureau of Services for the Visually Impaired – Family Resource Services – Erie County Directory of Services for Families of Preschool-Age Children – Early Childhood Program Resource lists from NICHCY are included for use as desired.

INTERNAL RESOURCES

S-W21

DATA BANK OF OUTSIDE RESOURCES

	NAME	PHONE
American Red Cross		
County Association for Retarded Citizens		
County Children Services Board		
County Department of Human Services		
County Board of Education		
County Board of MR/DD		
County Health Department		
Easter Seals		
Head Start		
Hospitals		
Mental Health Board		
Montessori		
OACCA Helping Ohio's Troubled Children		
Ohio Coalition for the Education of Handicapped Children		
Ohio Rehabilitation Services Commission		
Ohio Resource Center for Low Incidence and Severely Handicapped		
School Psychological Services		
SERRC (Special Education Regional Resource Center		
YMCA		

S-H34

OHIO REHABILITATION SERVICES COMMISSION FOR OHIOANS

A Directory of Local, State and National Organizations and Agencies Interested in People with Disabilities

Revised 2/91 Catalog #G-46

• consumer groups • public agencies • voluntary organizations • advocacy organizations • professional organizations • consumer groups • public agencies • voluntary organizations • advocacy organizations • professional organizations • consumer groups • public agencies • voluntary organizations • advocacy organizations • professional organizations • consumer groups • public agencies • voluntary organizations • advocacy organizations • professional organizations • consumer groups • public agencies • voluntary organizations • advocacy organizations • professional organizations • consumer groups • public agencies • voluntary

NICHCY
NATIONAL RESOURCES

CLEARINGHOUSES

Center for Special Education Technology
Council for Exceptional Children (CEC)
1920 Association Drive
Reston, VA 22091-1589
703-620-3660
800-345-TECH (Toll Free)

ERIC Clearinghouse on Handicapped and Gifted Children
Council for Exceptional Children (CEC)
1920 Association Drive
Reston, VA 22091-1589
703-620-3660

Higher Education and Adult Training for people with Handicaps (HEATH)
One Dupont Circle, N.W., Suite 800
Washington, DC 20036-1193
202-939-9320
800-544-3284 (Voice/TDD)

National Clearinghouse for Professions in Special Education
2021 K Street, N.W., Suite 315
Washington, DC 20006
202-296-1800

National Information Center
P.O. Box 1133
Washington, DC 20013-1133
301-565-4167 (in Maryland)
800-336-4797 (Toll Free)

National Information Center on Deafness (NICD)
Gallaudet University
800 Florida Avenue, N.E.
Washington, DC 20002
202-651-5051 (Voice)
202-651-5052 (TDD)

National Information Center on Deaf-Blindness
Gallaudet University, College Hall 217
800 Florida Avenue, N.E.
Washington, DC 20002
202-651-5289

National Rehabilitation Information Center (NARIC)
8455 Colesville Road, Suite 935
Silver Spring, MD 20910-3319
301-588-9284
800-346-2742 (Voice/TDD)

ORGANIZATIONS

American Council of Rural Special Education (ACRES)
Western Washington University
Miller Hall 359
Bellingham, WA 98225
206-676-3576

American Foundation for the Blind (AFB)
15 W. 16th Street
New York, NY 10011
212-620-2000
800-AFBLIND (Toll Free)

American Occupational Therapy Association (AOTA)
P.O. Box 1725
1383 Piccard Drive
Rockville, MD 20850
301-948-9626

American Physical Therapy Association (APTA)
1111 N. Fairfax Street
Alexandria, VA 22314
703-684-2782

American Speech-Language-Hearing Association (ASHA)
10801 Rockville Pike
Rockville, MD 20852
301-897-5700 (Voice/TDD)

Association for the Care of Children's Health (ACCH)
3615 Wisconsin Avenue, N.W.
Washington, DC 20016
402-244-1801

Association for Children and Adults with
Learning Disabilities (ACLD)
4156 Library Road
Pittsburgh, PA 15234
412-341-1515 or 412-341-8077

Association for Persons with Severe
Handicaps (TASH)
7010 Roosevelt Way, N.E.
Seattle, WA 98115
206-523-8446

Association for Retarded Citizens of the
United States (ARC)
2501 Avenue J
Arlington, TX 76005
817-640-0204

Autism Society of America
(formerly NSAC)
1234 Massachusetts Avenue, N.W.
Washington, DC 20005
202-783-0125

Council for Exceptional Children (CEC)
1920 Association Drive
Reston, VA 22091
703-620-3660

Epilepsy Foundation of America (EFA)
4352 Garden City Drive, Suite 406
Landover, MD 20785
301-459-3700

Head Start (Project)
Administration for Children, Youth
and Families
Office of Human Development Services
U.S. Dept. of Health and Human Services
P.O. Box 1182
Washington, DC 20013
202-755-7710

Independent Living Research Utilization
Project (ILRU)
The Institute for Rehabilitation and
Research
3400 Bissonnet, Suite 101
Houston, TX 77005
713-666-6244

March of Dimes Birth Defects Foundation
1275 Mamaroneck Avenue
White Plains, NY 10605
914-428-7100

Muscular Dystrophy Association (MDA)
810 Seventh Avenue
New York, NY 10019
212-586-0808

National Alliance for the Mentally Ill
(NAMI)
1901 N. Fort Myer Drive, #500
Arlington, VA 22209
703-524-7600

National Down Syndrome Congress
1800 Dempster Street
Park Ridge, IL 60068-1146
312-823-7550 (IL only)
800-221-4602 (Toll Free)

National Easter Seal Society
2023 W. Ogden Avenue
Chicago, IL 60612
312-243-8400
312-243-8880 (TDD)
800-221-6827 (Calls Outside IL)

National Head Injury Foundation, Inc.
333 Turnpike Road
Southborough, MA 01772
617-485-9950

National Library Service for the Blind &
Physically Handicapped
The Library of Congress
Washington, DC 20542
202-287-5100

National Spinal Cord Injury Association
600 West Cummings Park, Suite 2000
Woburn, MA 01801
617-935-2722
800-962-9629

Orton Dyslexia Society
724 York Road
Baltimore, MD 21204
301-296-0232
800-222-3123 (Toll Free)

Sibling Information Network
University Affiliated Program
991 Main Street, Suite 3A
East Hartford, CT 06108
203-282-7050

Sick Kids (need) Involved People (SKIP)
c/o SKIP of New York
500 E. 83rd Street, Suite 1B
New York, NY 10028
212-628-5994

Special Olympics
1350 New York Avenue, N.W., Suite 500
Washington, DC 20005-4709
202-628-3630

Spina Bifida Association of America
1700 Rockville Pike, Suite 540
Rockville, MD 20852
301-770-7222
800-621-3141 (Toll Free)

Trace Research and Development Center
on Communication, Control, and
Computer Access for Handicapped
Individuals
S-151 Waisman Center
1500 Highland Avenue
University of Wisconsin-Madison
Madison, WI 53705
608-262-6966

United Cerebral Palsy Associations, Inc.
66 E. 34th Street
New York, NY 10016
212-481-6300
800-872-1827 (Toll Free)

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NICHCY
STATE RESOURCE SHEET: OHIO

STATE DEPARTMENT OF EDUCATION: SPECIAL EDUCATION

Frank E. New, Director
Div. of Special Education
State Dept. of Education
933 High Street
Worthington, OH 43085-4017
(614) 466-2650

PROGRAMS FOR CHILDREN WITH HANDICAPS: AGES 3 THROUGH 5

Jane Wiechel, Assistant Director
Early Childhood Section
State Dept. of Education
65 S. Front Street, Room 202
Columbus, OH 43266
(614) 466-0224

PROGRAMS FOR INFANTS AND TODDLERS WITH HANDICAPS: AGES 0 THROUGH 2

James F. Quilty, Jr., M.D., Chief
Div. of Maternal and Child Health
State Dept. of Health
P.O. Box 118
Columbus, OH 43266-0118
(614) 466-3263

STATE VOCATIONAL REHABILITATION AGENCY

Robert Rabe, Administrator
Rehabilitation Services Commission
400 E. Campus View Boulevard
Columbus, OH 43235
(614) 438-1210

OFFICE OF STATE COORDINATOR OF VOCATIONAL EDUCATION FOR HANDICAPPED STUDENTS

D. James Gifreda, Assistant Director
Special Needs Services
Div. of Vocational Education
State Dept. of Education
65 S. Front Street, Room 918
Columbus, OH 43215
(614) 466-4835

STATE MENTAL HEALTH AGENCY

Pamela Hyde, Director
Dept. of Mental Health
30 E. Broad Street, Room 1180
Columbus, OH 43215
(614) 466-2337/4217

STATE MENTAL HEALTH REPRESENTATIVE FOR CHILDREN AND YOUTH

Patrick Canary, Chief
Bureau of Children's Services
Dept. of Mental Health
30 E. Broad Street, 11th Floor
Columbus, OH 43215
(614) 466-2337

STATE MENTAL RETARDATION PROGRAM

Robert E. Brown, Director
Department of MR/DD
State Office Tower
30 E. Broad Street, Room 1284
Columbus, OH 43215
(614) 466-5214

STATE DEVELOPMENTAL DISABILITIES PLANNING COUNCIL

Ken Campbell, Executive Director
Developmental Disabilities Program
Ohio DD Planning Council/
Dept. of MR/DD
State Office Bldg.
30 E. Broad Street, Room 1280
Columbus, OH 43215-3414
(614) 466-7203

PROTECTION AND ADVOCACY AGENCY

Carolyn Knight, Executive Director
Ohio Legal Rights Service
8 East Long Street, 6th Floor
Columbus, OH 43215
(614) 466-7264
(800) 282-9181 (In OH)

CLIENT ASSISTANCE PROGRAM

Marcus Canaday, CAP Administrator
Governor's Office of Advocacy for People with Disabilities
Client Assistance Program
8 E. Long Street, 7th Floor
Columbus, OH 43266-0400
(614) 466-9956

PROGRAMS FOR CHILDREN W/SPECIAL HEALTH CARE NEEDS

James F. Quilty, Jr., M.D., Chief
Div. of Maternal & Child Health
State Dept. of Health
246 N. High Street Columbus, OH
43266-0118
(614) 466-3263

STATE EDUCATION AGENCY RURAL REPRESENTATIVE

William Strayer
Division of Special Education
Dept. of Education
933 High Street
Worthington, OH 43085 (614) 466-2650

DISABILITY AGENCIES

Autism
Anne Lawyer, President
Ohio State Society
Autism Society of America
OSU, 320 10th Avenue
Columbus, OH 43212
(614) 292-3881

Cerebral Palsy
Francis McCaffrey, Executive Director
United Cerebral Palsy of Ohio
P.O. Box 14780
Columbus, OH 43214

Epilepsy
Katherine Patterson, Executive Director
Epilepsy Assn. of Central Ohio
144 E. State Street, 2nd Floor
Columbus, OH 43215

Learning Disabilities
Mary Giallombardo, President
OH Assn. for Children w/Learning Dis.
2800 Euclid Avenue, Suite 125
Cleveland, OH 44115
(216) 861-6665

Mental Health
Mental Health Association of Ohio
50 W. Broad Street, Suite 2440
Columbus, OH 43215
(614) 221-5383

Maggie Smith, President
OH Alliance for the Mentally Ill
1118 Independence Avenue, #2117
Akron, OH 44310

Mental Retardation
Carolyn Sidwell, Executive Director
Ohio Association for Retarded Citizens
360 S. Third Street, Suite 101
Columbus, OH 43215
(614) 228-4412

Speech and Hearing
Kathy Kelley-Ohlrich, President
Ohio Speech and Hearing Assn.
9331 S. Union Road
Miamisburg, OH 45342
(513) 866-4972

Spina Bifida
Fred Keer
Spina Bifida Assn.-OH State Coalition
3675 Dragonfly Drive
Columbus, OH 43204
(614) 276-0959

UNIVERSITY AFFILIATED PROGRAMS

Jack H. Rubenstein, M.D., Director
University Affiliated Cincinnati Center for Developmental Disabilities
Pavilion Building
Elland & Bethesda Avenues
Cincinnati, OH 45229
(513) 559-4623

Stephen Schroeder, Director
The Nisonger Center
The Ohio State University
McCampbell Hall, 1581 Dodd Drive
Columbus, OH 43210-1205
(614) 292-8365

PARENT TRAINING INFORMATION PROJECTS

Margaret Burley, Executive Director
Ohio Coalition for the Education of
Handicapped Children (OCEHC)
933 High Street, Suite 106
Worthington, OH 43085
(614) 431-1307

Cathy Heizman, Executive Director
Tri-State Organized Coalition for Persons
with Disabilities (SOC)
106 Wellington Place, Lower Level
Cincinnati, OH 45219
(513) 381-2400

PARENT-TO-PARENT

Margaret Burley, Executive Director
OH Coalition for the Education of
Handicapped Children
933 High Street, Suite 106
Worthington, OH 43085
(614) 431-1307

OTHER ORGANIZATIONS

Sheila M. Dunn, Executive Director
Ohio Easter Seal Society
2204 S. Hamilton Road
Columbus, OH 43232-0462
(614) 868-9126

AGE OF ELIGIBILITY

Each state sets eligibility ages for services to students with disabilities. For current information concerning this state, please contact the office listed under **STATE DEPARTMENT OF EDUCATION: SPECIAL EDUCATION.**

Revised 1/89A

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FOR ADDITIONAL RESOURCES, CALL NICHCY'S TOLL-FREE NUMBER AND LEAVE YOUR MESSAGE: 1-800-999-5599.

LEVEL: STAFF

GOAL: #4 Gain competency in knowing when and how to seek additional resources for managing behaviors that are beyond the scope of the school setting for individual child needs.

COMPETENCY TYPE: SKILL *(continued)*

OBJECTIVE: Participants will develop a resource data bank and the strategies necessary for suggesting its use to parents.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Small group activity Group suggestions will be made on how to encourage the use of non-educational resources when needed.	2. Worksheet/Transparency (S-W22) *Strategies for Resource Encouragement* Handout (S-H37) *Sample Information Survey* Transparency (S-T24) *Interagency Council*	2. Discuss ideas generated by the group. This could be used with families as a first step in discussing a family or child need. If there is no Interagency Council in the community, participants might determine if one is needed. If one is functioning, participants should learn of their role/function.

S-W22

STRATEGIES FOR RESOURCE ENCOURAGEMENT

DIRECTIONS: List ways to encourage the use of:

1. Outside Agency Resources for skill acquisition in developmental areas

2. Agency Family Counseling

3. Agency Financial Assistance

4. Public Health Agencies

5. Mental Health Agencies

6. Interagency Council for Preschoolers

S-H37

SAMPLE INFORMATION SURVEY

1. Child's Name ____________________

2. Address ____________________

3. Telephone (Home) __________ (Work) __________ (Hours __________)

4. Who lives in your home?

Name	Relationship	Age

5. What language/s is spoken in the home?

____

6. How long have you lived in the neighborhood/community?

____

7. What community agencies are you working with?

____

____

____

8. Are there areas of concern that you would like addressed through agencies other than the school?

____

____

____

AN INTERAGENCY COUNCIL IS ...

COLLABORATIVE

Nonpartisan issues of families and children

ALIVE

Working with real issues toward real solutions

CREDIBLE

Meets regularly

Adapted from: Arnn, L. and Kelsey, C. (1989). *Strategies for early intervention programs.* Palo Alto: Vort.

LEVEL: STAFF

GOAL: **#4** Gain competency in knowing when and how to seek additional resources for managing behaviors that are beyond the scope of the school setting for individual child needs.

COMPETENCY TYPE: VALUE/ATTITUDE

OBJECTIVE: A. Participants will value the need for additional information/assistance.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Participants will tell when they know they need additional help and why it is appropriate to seek it.	1. Transparency/Worksheet (S-T25) *Additional Help — Why?*	1. Develop a list of ways participants will know they need additional help. Focus on why it is appropriate to encourage both "in-house" and "non-school" help. Discuss ideas.

S-T25

ADDITIONAL HELP — WHY?

List situations that lend themselves to seeking support. How does one know the assistance is needed?

SITUATIONS	WHY?

LEVEL: STAFF

GOAL: **#4** Gain competency in knowing when and how to seek additional resources for managing behaviors that are beyond the scope of the school setting for individual child needs.

COMPETENCY TYPE: VALUE/ATTITUDE *(continued)*

OBJECTIVE: B. Participants will evaluate the information and/or assistance and its implications for implementation.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Large or small group activity Participants will evaluate sample suggestions from an outside agency and determine if appropriate. If not, suggest ways to handle the situation and decide how to follow-up on the outcome.	2. Worksheet (S-W23) *Evaluation Situations* Transparency (S-T26) *Evaluating Situations — Possible Answers*	2. The leader may use the given situation, write their own, or use some from the participants. The participants will review and evaluate the given situation and discuss reasoning for decision. The leader may wish to pass out the information sheet in addition to or instead of the Worksheet to stimulate discussion.

S-W23

EVALUATING SITUATIONS

Evaluate the following suggestions from outside agencies. Determine if they are appropriate and decide how to follow-up on the outcome. Suggest ways to handle a situation when the recommendations from outside agencies are either not possible or in contrast to appropriate center-based or itinerant service methods.

AN AGENCY RECOMMENDS:

1. Speech and language services for one hour a week while in preschool.

Appropriate and Possible?
If yes, how to follow-up on the outcome?

If no, ways to handle the situation:

2. An agency recommends a systematic behavioral plan with coordination of a communication board for a child with limited expressive language skills.

Appropriate and Possible?
If yes, how to follow-up on the outcome:

If no, ways to handle the situation:

3. A recommendation from an agency for time out to be placed in the hallway.

Appropriate and Possible?
If yes, how to follow-up on the outcome:

If no, ways to handle the situation:

4. An agency recommendation is to provide special education services in addition to preschool.

Appropriate and Possible?
If yes, how to follow-up on the outcome:

If no, ways to handle the situation:

EVALUATING SITUATION — POSSIBLE ANSWERS

1. An agency recommends speech and language services for one hour a week while in preschool.

   Appropriate and Possible? NO

   If yes, how to follow-up on the outcome:

   If no, ways to handle the situation:

   The child is only in school two days for five hours a week. Speech and language services may be provided on alternate days, before or after preschool, or for a shorter period of time.

2. An agency recommends a systematic behavioral plan with coordination of a communication board for a child with limited expressive language skills.

   Appropriate and Possible? YES

   If yes, how to follow-up on the outcome:

   The people providing the services, which might include the speech pathologist, school psychologist, the teacher, and/or a teacher with administrative support, will meet to organize and develop an appropriate plan of services to be provided.

   If no, ways to handle the situation:

3. A recommendation from an agency for time out to be placed in the hallway.

   Appropriate and Possible? NO

   If yes, how to follow-up on the outcome:

   If no, ways to handle the situation:

   > The time out location cannot be located outside of the room in the hallway because the child would be unsupervised. The location may be moved within the room or a volunteer may wish to supervise the child.

4. An agency recommendation is to provide special education services in addition to preschool.

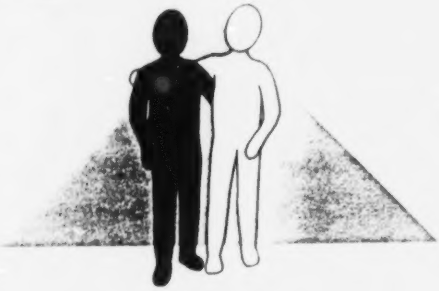
   Appropriate and Possible? YES

   If yes, how to follow-up on the outcome:

   > The child may be in a regular preschool program and receive itinerant services from a special education teacher. The regular preschool teacher and the itinerant teacher would discuss the child's background and the itinerant teacher will develop an Individualized Educational Plan (IEP) for that child.

   If no, ways to handle the situation:

Managing Behaviors



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GOAL 5

LEVEL: STAFF

GOAL: **#5** Develop an understanding of a philosophy which provides for the development of self-control that can be used to conceptualize a developmentally appropriate environment and behavior plan for either center-based or itinerant-based preschool learning for all children, those who are typically developing and those with disabilities..

COMPETENCY TYPE: KNOWLEDGE

OBJECTIVE: Participants will show how the behavioral component of development, the environment, and planning impact on preschool success for all children.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Small group activity Participants will consolidate all of the information used in the previous staff competencies to describe an ideal preschool setting and management style that facilitates development of self-control in young children.	1. Worksheet/Transparency (S-W24) *Ideal Preschool Setting and Management Style* Draw from previous staff competencies developed in goals 1-4.	1. This is a review activity that can be distributed and discussed. It may be more appropriate to develop a set of questions to aid in the consolidation of the information. The dynamics of the group should be the determining factor in this decision.

S-W24

IDEAL PRESCHOOL SETTING AND MANAGEMENT STYLE

Define Developmentally-Appropriate Practices

Developmentally-Appropriate Environment

Preventative Approaches to Managing Behaviors

Importance of Supportive Adults

Need to Seek Additional Resources

Itinerant — Center-Based — Mixed Issues

LEVEL: STAFF

GOAL: #5 Develop an understanding of a philosophy which provides for the development of self-control that can be used to conceptualize a developmentally appropriate environment and behavior plan for either center-based or itinerant-based preschool learning for all children, those who are typically developing and those with disabilities..

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: Participants will show how the behavioral component of development, the environment, and planning impact on preschool success for all children.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Small group activity Participants will know what a parent or professional educator/service provider should look for and inquire about when selecting a preschool for a typically developing child or for a child with a disability that is sensitive to issues of diversity and that supports the development of self-control in children.	2. Handout (S-H38) *Selecting A Preschool* Transparency (S-T27) *Selecting A Preschool Summary Sheet* A brainstorming note page will be provided with a place for a group summary.	2. Small groups should brainstorm this activity from their personal situation. There could be a group of preschool teachers, speech/language pathologists, school nurses, psychologists, occupational therapists/physical therapists, etc. based on the make-up of the group. It will help to know this information ahead of time.

PEEKING INTO PRESCHOOL

(questions to consider when selecting a preschool program)

WHEN CONSIDERING THE DIFFERENCES AMONG PRESCHOOLS IT IS IMPORTANT TO CONSIDER THE FOLLOWING FACTORS:

General Considerations:

- Center is licensed by the state
- Is there an age requirement
- Does the Center accept handicapped children
- Is a physical examination and/or immunization required
- Are mastery of self-help skills required (e.g. toilet trained)
- Fees
  - registration fee
  - tuition (cost, payment schedules, sliding scale, discount rate if more than one child attends from the same family, etc.)
  - miscellaneous (supply fee, refreshment fee, field trips, etc.)
- Arrival and dismissal times

Policies:

- Liability insurance
- Health policy
  - who will administer first aid
  - separate space to isolate ill children
- Emergency and health forms
- Absenteeism policy
  - who to contact if the child is ill
- Evacuation policy
  - fire drill (one per month)
  - tornado drill, etc.
- Food policy
  - if food is served, does the Center possess a health certificate from the State
  - who provides the refreshments
  - who serves it
  - type of food provided
- Observations of holidays, birthdays and other special occasions
- Is parental participation in parties recommended
- Field trips
  - who is responsible
- Discipline policy

Physical Environment:

- Building should be adequately heated, ventilated and well lighted
- Sufficient restroom facilities
- Ample space for indoor and outdoor play

Educational Environment:

- Daily schedule — Do they have:
  - restroom breaks
  - snack time
  - play time
    - structured and free play time
    - outdoor and indoor play time
    - quiet time and active play time
- Sharing time
- Rest time
  - where are cots placed if a nap time is in the daily schedule
- Activities and Lessons
  - are the activities designed to facilitate exploration, discovery, physical, emotional, and mental development of the child

  - do they encourage self expression
  - are there large and/or small group activities
  - are the lessons to be taught prepared for the age level of the child
  - these should include:
    - physical development
      - fine and gross motor skills
    - speech and language development
    - social development (e.g. taking turns)
    - readiness skills
      - basic concepts (e.g. colors, prepositions, etc.)
      - math skills (e.g. shapes, sizes, etc.)
      - reading skills (e.g. alphabet, phonics, etc.)
      - science skills (e.g. the environment, etc.)
      - exposure to the arts
        - music
        - art
- Evaluation
  - parent/teacher conferences
  - progress reports
    - how many
    - when
    - verbal and/or written

Staff:

- Center administrator and head teacher should be certified by the State
- Trained Assistants in the area of early childhood education and child development
- Number of teachers per age group
  - 3 and 4 year olds - for each 15 children there should be one teacher
  - 5 year olds - for each 20 children there should be one teacher

DEVELOPED BY:

Northern Ohio SERRC
Educational Assessment Team
218 N. Pleasant Street
Room 100
Oberlin, OH 44074
(216) 775-2786

This project funded by Title VI-B, EHA

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SELECTING A PRESCHOOL SUMMARY SHEET

GROUP 1

GROUP 2

GROUP 3

GROUP 4

GROUP 5

LEVEL: STAFF

GOAL: **#5** Develop an understanding of a philosophy which provides for the development of self-control that can be used to conceptualize a developmentally appropriate environment and behavior plan for either center-based or itinerant-based preschool learning for all children, those who are typically developing and those with disabilities..

COMPETENCY TYPE: SKILL

OBJECTIVE: Participants will select topics that should be included in a presentation or brochure to describe the management philosophy for a preschool program based on best practice theory.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Individual or small group activity Using information from the knowledge activity, participants will outline topics that should be included in a presentation or brochure. Participants will then discuss those points that should be included in each part of the presentation outline.	1. Use previous outline (knowledge competency) and philosophy statement as a guide. Additional resources can be distributed. Worksheet in outline form can be used to arrange topics for a presentation. Worksheet/Transparency (S-W25)	1. Briefly review the materials then give the participants time to develop an initial topical outline on the Worksheet provided. It may be wise to divide the group into two groups; one to develop a presentation, another to develop a brochure. Again, this activity depends on the makeup of the group of participants.

S-W25

What topics would you include for each of the following audiences:

PARENTS:

TEACHERS:

ADMINISTRATORS:

SUPPORT STAFF:

MIXED GROUP:

OTHERS:

LEVEL: STAFF

GOAL: #5 Develop an understanding of a philosophy which provides for the development of self-control that can be used to conceptualize a developmentally appropriate environment and behavior plan for either center-based or itinerant-based preschool learning for all children, those who are typically developing and those with disabilities..

COMPETENCY TYPE: VALUE/ATTITUDE

OBJECTIVE: Participants will describe the philosophical basis for environmental/behavioral considerations selected for inclusion in a preschool that support the development of self-control in young children.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Individual activity Participants will write a philosophical statement to share with others for use as the basis of classroom management in their particular setting.	1. Worksheet/Transparency (S-W26) *Statement of Philosophy* Use a titled Worksheet to write statement.	1. It is important to make participants feel that this is for self-use and will not be evaluated by the group.
2. Large group activity Participants will evaluate each other's statements to improve or change their own.	2. Use the Worksheet from above for self-analysis.	2. Have volunteers read their statement. Others may ask questions or make suggestions; however, the focus of this task is *not* to change other's statements, but to improve or change one's own. This is not intended to be a critique but a self-analysis with input from others.

S-W26

STATEMENT OF PHILOSOPHY

INSTRUCTIONS: Working alone for the next ten minutes, write your own statement of philosophy for classroom management in your particular setting.

LEVEL: STAFF

GOAL: #5 Develop an understanding of a philosophy which provides for the development of self-control that can be used to conceptualize a developmentally appropriate environment and behavior plan for either center-based or itinerant-based preschool learning for all children, those who are typically developing and those with disabilities.

COMPETENCY TYPE: VALUE/ATTITUDE *(continued)*

OBJECTIVE: Participants will describe the philosophical basis for environmental/behavioral considerations selected for inclusion in a preschool that supports the development of self-control in young children.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
3. Small group activity Participants will attempt to convert their philosophy to a slogan that could be used for presentations, covers for parent information, etc. This is optional.	3. Worksheet/Transparency (S-W27) *Slogans*	3. Small groups can work on this together. This could be a time to discuss the "acronym mania" that currently exists. Ways to use this slogan or acronym may be brainstormed together. An example of a slogan is the title of the itinerant-based program in North Ridgeville City Schools called "MAX" — Maximum Potential Early Intervention. Others could be shared by the group as examples.

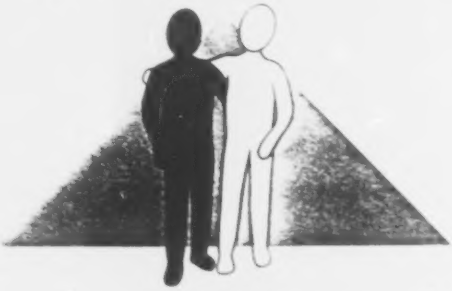
SLOGANS

INSTRUCTIONS: Working in small groups, attempt to develop one slogan for each person's stated philosophy.

PROJECT PREPARE

Modules for Competency-Based
Personnel Preparation in
Early Childhood Education

Managing Behaviors



Administrator

GOALS

1. Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

2. Gain competency in developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

3. Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

4. Gain competency in knowing when and how to seek additional resources for managing behaviors that are beyond the scope of the school setting for individual child needs.

5. Develop an understanding of a philosophy which provides for the development of self-control that can be used to conceptualize a developmentally appropriate environment and behavior plan for either center-based or itinerant-based preschool learning for all children, those who are typically developing and those with disabilities.

GOAL 1

Managing Behaviors

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LEVEL: ADMINISTRATOR

GOAL: **#1** Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: KNOWLEDGE

OBJECTIVE: Participants will know developmental expectations and how they impact on program delivery in various settings: itinerant-based, integrated preschool, and special classroom.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Review the concept of ages and developmental expectations.	1. Handouts/Transparency (A-H1, 2, and 3) U.S. Government Printing Office. (1980). *Chart of normal development: Infancy to six years of age* Ohio Disabilities Planning Council. *An ounce of prevention* Bredekamp, S. (Ed.) (1987). *Developmentally appropriate practice in early childhood programs serving children from birth through age 8.* (exp. ed.)	1. Discuss why understanding development is an important part of dealing with behavior issues for young children. Birth to three is given to participants for future reference: it will not be developed. Two or three charts will be provided for use. Differences, while slight, may help with the concept development. *An Ounce of Prevention,* a 20-minute video, is available through SERRC library for those who wish to focus on signs of typical development in infants, toddlers, and preschoolers. Handout used in this activity goes with video. Preview the video prior to presentation to match it to the expected needs of the audience. It starts with infancy; therefore, the last 10 minutes may be more helpful to establish the basis for this objective. A chart to be used with the video is included in the next activities.

CHART OF NORMAL DEVELOPMENT
(U.S. Government Printing Office, 1980)

24-36 MONTHS

Motor Skills

Gross Motor Skills

Runs forward well.

Jumps in place, two feet together.

Stands on one foot, with aid.

Walks on tiptoe.

Kicks ball forward.

Fine Motor Skills

Strings four large beads.

Turns pages singly.

Snips with scissors.

Holds crayon with thumb and fingers, not fist.

Uses one hand consistently in most activities.

Imitates circular, vertical, horizontal strokes.

Paints with some wrist action. Makes dots, lines, circular strokes.

Rolls, pounds, squeezes, and pulls clay.

Communication Skills

Understanding Language

Points to pictures of common objects when they are named.

Can identify objects when told their use.

Understands question forms **what** and **where.**

Understands negatives **no, not, can't,** and **don't.**

Enjoys listening to simple storybooks and requests them again.

Spoken Language

Joins vocabulary words together in two-word phrases.

Gives first and last name.

Asks **what** and **where** questions.

Makes negative statements (for example, **Can't open it**).

Shows frustration at not being understood.

Cognitive Skills

Responds to simple directions (for example: **Give me the ball and the block. Get your shoes and socks).**

Selects and looks at picture books, names pictured objects, and identifies several objects within one picture.

Matches and uses associated objects meaningfully (for example, given cup, saucer, and bead, puts cup and saucer together).

Stacks rings on peg in order of size.

Recognizes self in mirror, saying, baby, or own name.

Can talk briefly about what he or she is doing.

Imitates adult actions (for example, housekeeping play).

Has limited attention span. Learning is through exploration and adult direction (as in reading of picture stories).

Is beginning to understand functional concepts of familiar objects (for example, that a spoon is used for eating) and part/whole concepts (for example, parts of the body).

Self-Help Skills

Uses spoon, spilling little.

Gets drink from fountain or faucet unassisted.

Opens door by turning handle.

Takes off coat.

Puts on coat with assistance.

Washes and dries hands with assistance.

Social Skills

Plays near other children.

Watches other children, joins briefly in their play.

Defends own possessions.

Begins to play house.

Symbolically uses objects, self in play.

Participates in simple group activity (for example, sings, claps, dances).

Knows gender identity.

47

CHART OF NORMAL DEVELOPMENT
(U.S. Government Printing Office, 1980)

36-48 MONTHS

Motor Skills		Communication Skills	
Gross Motor Skills	Fine Motor Skills	Understanding Language	Spoken Language
Runs around obstacles. Walks on a line. Balances on one foot for 5 to 10 seconds. Hops on one foot. Pushes, pulls, steers wheeled toys. Rides (that is, steers and pedals) tricycle. Uses slide without assistance. Jumps over 15cm. (6") high object, landing on both feet together. Throws ball overhead. Catches ball bounced to him or her.	Builds tower of nine small blocks. Drives nails and pegs. Copies circle. Imitates cross. Manipulates clay materials (for example, rolls balls, snakes, cookies).	Begins to understand sentences involving time concepts (for example, **We are going to the zoo tomorrow**). Understands size comparatives such as **big** and **bigger.** Understands relationships expressed by **if ... then** or **because** sentences. Carries out a series of two to four related directions. Understands when told, Let's **pretend.**	Talks in sentences of three or more words, which take the form agent-action-object (**I** see the ball) or agent-action-location (Daddy **sit** on chair). Tells about past experiences. Uses "s" on nouns to indicate plurals. Uses "ed" on verbs to indicate past tense. Refers to self using pronouns **I** or me. Repeats at least one nursery rhyme and can sing a song. Speech is understandable to strangers, but there are still some sound errors.

Cognitive Skills		**Self-Help Skills**	**Social Skills**
Recognizes and matches six colors. Intentionally stacks blocks or rings in order of size. Draws somewhat recognizable picture that is meaningful to child, if not to adult. Names and briefly explains picture. Asks questions for information (why and how questions requiring simple answers). Knows own age. Knows own last name.	Has short attention span. Learns through observing and imitating adults, and by adult instruction and explanation. Is very easily distracted. Has increased understanding of concepts of the functions and groupings of objects (for example, can put doll house furniture in correct rooms), and part/whole (for example, can identify pictures of hand and foot as parts of body). Begins to be aware of past and present (for example: **Yesterday we went to the park. Today we go to the library**).	Pours well from small pitcher. Spreads soft butter with knife. Buttons and unbuttons large buttons. Washes hands unassisted. Blows nose when reminded. Uses toilet independently.	Joins in play with other children. Begins to interact. Shares toys. Takes turns with assistance. Begins dramatic play, acting out whole scenes (for example, traveling, playing house, pretending to be animals).

CHART OF NORMAL DEVELOPMENT
(U.S. Government Printing Office, 1980)

48-60 MONTHS

Motor Skills		**Communication Skills**	
Gross Motor Skills	Fine Motor Skills	Understanding Language	Spoken Language
Walks backward toe-heel. Jumps forward 10 times, without falling. Walks up and down stairs alone, alternating feet. Turns somersault.	Cuts on line continuously. Copies cross. Copies square. Prints a few capital letters.	Follows three unrelated commands in proper order. Understands comparative like pretty, prettier, and prettiest. Listens to long stories but often misinterprets the facts. Incorporates verbal directions into play activities. Understands sequencing of events when told them (for example, First we have to go to the store, then we can make the cake, and tomorrow we will eat it).	Asks when, how, and why questions. Uses modals like can, will, shall, should, and might. Joins sentences together (for example, I like chocolate chip cookies and milk). Talks about causality by using because and so. Tells the content of a story but may confuse facts.

Cognitive Skills		**Self-Help Skills**	**Social Skills**
Plays with words (creates own rhyming words; says or makes up words having similar sounds). Points to and names four to six colors. Matches pictures of familiar objects (for example, shoe, sock, foot; apple, orange, banana). Draws a person with two to six recognizable parts, such as head, arms, legs. Can name and match drawn parts to own body. Draws, names, and describes recognizable picture. Rote counts to five, imitating adults.	Knows own street and town. Has more extended attention span. Learns through observing and listening to adults as well as through exploration. Is easily distracted. Has increased understanding of concepts of function, time, part/whole relationships. Function or use of objects may be stated in addition to names of objects. Time concepts are expanding. The child can talk about yesterday or last week (a long time ago), about today, and about what will happen tomorrow.	Cuts easy foods with a knife (for example, hamburger patty, tomato slice). Laces shoes.	Plays and interacts with other children. Dramatic play is closer to reality, with attention paid to detail, time, and space. Plays dress-up. Shows interest in exploring sex differences.

CHART OF NORMAL DEVELOPMENT
(U.S. Government Printing Office, 1980)

60-72 MONTHS

Motor Skills

Gross Motor Skills

Runs lightly on toes.

Walks on balance beam.

Can cover two meters (6'6") hopping.

Skips on alternate feet.

Jumps rope.

Skates.

Fine Motor Skills

Cuts out simple shapes.

Copies triangle.

Traces diamond.

Copies first name.

Prints numerals 1 to 5.

Colors within lines.

Has adult grasp of pencil.

Has handedness well established (that is, child is left- or right-handed).

Pastes and glues appropriately.

Communication Skills

Understanding Language

Demonstrates pre-academic skills.

Spoken Language

There are few obvious differences between child's grammar and adult's grammar.

Still needs to learn such things as subject-verb agreement, and some irregular past tense verbs.

Can take appropriate turns in a conversation.

Gives and receives information.

Communicates well with family, friends, or strangers.

Cognitive Skills

Retells story from picture book with reasonable accuracy.

Names some letters and numerals.

Rote counts to 10.

Sorts objects by single characteristics (for example, by color, shape, or size if the difference is obvious).

Is beginning to use accurately time concepts of tomorrow and yesterday.

Uses classroom tools (such as scissors and paints) meaningfully and purposefully

Begins to relate clock time to daily schedule.

Attention span increases noticeably. Learns through adult instruction. When interested, can ignore distractions.

Concepts of function increase as well as understanding of why things happen. Time concepts are expanding into an understanding of the future in terms of major events (for example, Christmas will come after two weekends).

Self-Help Skills

Dresses self completely.

Ties bow.

Brushes teeth unassisted.

Crosses street safely.

Social Skills

Chooses own friend(s).

Plays simple table games.

Plays competitive games.

Engages with other children in cooperative play involving group decisions, role assignments, fair play.

A-H2

AN OUNCE OF PREVENTION
EARLY INTERVENTION AND YOUR BABY
(Ohio Disabilities Planning Council)

While it all seems like child's play, parents should know that everything their baby does from birth to age four is his real business ... the business of growing up healthy and strong. The physical things you see your baby do are called "motor skills". If the fine motor skills aren't developed, the child may have problems writing and reading. If the large body movement, the gross motor skills, don't come along, the youngster may be uncoordinated and find it hard to play and work with other kids.

It's easy to see how the slow development of these skills could put a child behind. And these problems can create emotional trouble for the child, too. If your baby does many of the things earlier than shown in this guide, great! Many kids do. But those who develop slower may be children who have special needs right now!

The person who has the best chance of catching a problem and getting help for the child is the person who knows and loves the child best. That's you ... the most important person in your baby's life.

Let's see how you can help your child grow up to be everything he or she can be by making sure some important events in growing up are reached. We call these events "milestones."

AGE
MILESTONE

8 to 10 weeks
- baby smiles

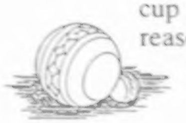
0 to 3 months
- baby sucks strongly
- baby has good muscle tone (not limp)
- baby has a good grip (not slack arms & legs)
- baby makes cooing noises
- baby will quiet when mom's voice is heard
- baby will look at you and make eye contact

3 to 5 months
- baby lifts head when laid on tummy
- baby laughs out loud
- baby tries different cries and noises — you know when he's mad or wet!
- baby is a copy cat — claps hands or opens mouth when you do

AGE
MILESTONE

6 to 9 months
- baby reaches for toys with either hand
- baby lifts head high while balancing on forearms
- baby's head is not at all wobbly
- baby responds to you as a favorite person
- baby turns head to a voice
- baby can roll over unassisted
- baby can usually sit without support by 8 months
- baby eats with fingers by 9 months
- baby can enjoy new games — can do patty-cake and peek-a-boo
- baby can wave bye-bye
- baby likes to look at his reflection in a mirror
- baby holds arms out when he wants to be held
- baby imitates familiar sounds like "ma-ma" or "da-da"

9 months to 1 year
- baby begins to say things like "ma-ma" with no coaching
- baby has a three-word vocabulary of things he really knows and can call for by around 1 year
- baby knows what "no-no" means, even though it's sometimes ignored
- baby can pull himself to a stand and move around with the furniture's support
- baby should put weight on his foot when walking (if baby walks on his toes, let pediatrician know)
- baby likes to look at pictures in books
- baby understands phrases like "give me that"
- baby usually will have mastered drinking with a cup
- baby can figure out that something out of sight is not gone — for example, looking for a ball under a cup (That's the beginning of reasoning!)



AGE
MILESTONE

1 to 1½ years

- baby usually has learned to stand alone
- baby is walking pretty well by 18 months
- baby sleeps through the night, unless sick or teething
- baby tries to feed self with spoon
- baby chews more, drools less
- baby can drink from a cup very well
- baby likes to dump and pick up things
- baby likes to imitate what you do — for example, sweeping, hammering, or pretending to read
- baby can point to things you call out in pictures
- baby likes to scribble
- baby can point to at least one body part
- baby can say lots of words — 7 to 20 are about right
- baby can make things happen — not just watch things happen (clue: look at how baby handles toys)

1½ to 2 years
- child may be trying to climb stairs
- child is curious about everything
- child can handle crayons pretty well and can draw a line
- child can build a tower four blocks high
- child knows lots of words, and can combine two words now — verbs like "go" and adjectives like "pretty"
- child can call himself by own name
- child recognizes lots of things in pictures — for example, which is "doggie" or "cow"
- child can name more than three body parts
- child can follow simple directions

AGE
MILESTONE

2 to 3 years

- child recognizes and expresses emotion
- child demonstrates "I'm me" in a lot of ways, sometimes negative
- child tells you what he wants — sometimes will demand it (it's a baby's way of learning to be a separate person)
- child dresses himself with help
- child runs pretty well
- child can speak in simple phrases (although at this age, some children may be hard to understand)
- child can build a tower of eight blocks
- child can pedal a tricycle
- child can jump in place
- child can understand and tell you he is cold, hungry, or tired

AGE
MILESTONE

3 to 4 years

- child can use the toilet with few accidents (if not, don't worry — this skill means less than lots of other things like motor development and learning to speak clearly)
- child can balance first on one foot, then on the other
- child can copy simple designs
- child can count to three
- child knows two to three colors
- child knows his first and last name (if you've taught him)
- child talks pretty well now and even people outside the family can understand him (you shouldn't need to translate anymore — if not, check with a speech professional to be sure)

3 to 4 years

- child can follow directions that have more than one step (like "take off your jacket and pick up your toys")
- child will be trying to wash his face and brush his teeth
- child can separate easily from you now to play with friends

WHAT SHOULD YOU DO IF YOU THINK YOUR BABY MAY HAVE SPECIAL NEEDS AFTER EXAMINING THESE "MILESTONES"?

1. *Congratulate yourself for not waiting.*

2. *Talk to your pediatrician or doctor about your worries to make sure your baby isn't being delayed because he can't hear or see well.*

- Have the physical things checked out first
- Point out the things you've noticed
- Don't hesitate to ask persistent questions
- Have your doctor, clinic, or public health nurse point you toward an agency which works with youngster's special needs

3. *Look in your community for resources that are available by checking your phone book ... really look — there's help available! Look up*

- *Mental health, child guidance or mental retardation/developmental disabilities agencies* — these agencies often deal with children's developmental problems
- Your *local school system*
  - — All states require their schools to find special youngsters from birth, not just after they enter school
  - — Ohio's schools are required to evaluate kids and help diagnose developmental and learning problems
- An organization in Ohio called *the Bureau of Crippled Children's Services* — don't let the term "crippled" mislead you ... the agency works for kids with all kinds of problems
- *Family Service Agencies — United Way Health Agencies* and *Children's Hospitals* can often get you with the professional who can help your child
- *Parents' organizations* which are specifically set up to help kids with certain problems ... the parents get important help too (groups like *United Cerebral Palsy, the Association for Children and Adults with Learning Disabilities,* or *the Association for Retarded Citizens* in Ohio)
- *Local colleges and universities* — they may have people who can point you in the right direction (try the departments of education, child development or nursing to start)
- Ohio's two excellent resources for figuring out what special services your child may need — *The Nisonger Center* in Columbus and *The Cincinnati Center for Developmental Disorders*
- Centers called *Special Education Regional Resource Centers* — they can help you judge whether your child needs an extra boost, and may know what pre-school programs are available in your community to help (including *Head Start*)

4. *Let's not forget the most important resource of all ... you!*

- Play with your child spontaneously as most parents do ... practicing skills and praising each small accomplishment
- A child with special needs may require a little more help — you may have to do the play activities more often or in different ways ... fun things any parent can learn to do

Will this all be worth it? You bet! You'll be giving your baby the best start possible. Your baby will be one of the lucky ones who have concerned parents to care for them. Your baby is lucky to have you!

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DEVELOPMENTALLY APPROPRIATE PRACTICE IN EARLY CHILDHOOD PROGRAMS SERVING CHILDREN FROM BIRTH THROUGH AGE 8

Expanded Edition

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PART 4

DEVELOPMENTALLY APPROPRIATE PRACTICE IN PROGRAMS FOR 3-YEAR-OLDS

The 3-year-old is sometimes overlooked when periods of development are described in broad categories like "toddlers" or "preschoolers." But the fourth year of life is a distinct period of development with its own unique challenges and accomplishments. Teachers in programs serving 3-year-olds, as in all early childhood programs, must consider what is appropriate for this age group in general as well as what is specifically appropriate for the individual children in their care.

Three-year-olds are no longer toddlers but they will behave like toddlers at times; at other times their language ability and motor skills will deceptively mimic the 4-year-old. The key for the teacher of 3s is to maintain appropriate expectations; teachers should not expect too little of 3-year-olds, nor should they expect too much. To care for and educate a group of 3s, teachers need to fully understand the developmental continuum from toddlerhood through the preschool years. At 2½, many children begin to display skills and behaviors most typical of 3-year-olds. Thus, children between 2½ and 3½ years of age are often similar developmentally; and some 3½-year-olds share traits of 4s. The common practice of multiage grouping, putting children of a wide age span together, further necessitates that teachers fully understand the continuum of development during the early years.

The following statement describes some developmentally appropriate and inappropriate practices specifically related to 3-year-olds. *This statement is not intended to describe a comprehensive program for 3s. It is intended to be used with the statement on appropriate practice for toddlers* (pages 40-46) *and the statement on appropriate practice for 4- and 5-year-olds* (pages 51- 59).

Living and Learning With 3-Year-Olds: Interactions Among Adults and Children and Appropriate Curriculum

APPROPRIATE Practice	INAPPROPRIATE Practice
• Adults provide affection and support, comforting children when they cry and reassuring them when fearful. Adults plan experiences to alleviate children's fears.	• Adults are cold or distant and do not express physical affection, comfort, or emotional bolstering. Adults assume children will get over fears.
• Adults support 3-year-olds' play and developing independence, helping when needed, but allowing them to do what they are capable of doing and what they want to do for themselves ("I can do it myself!").	• Adults expect 3-year-olds to be independent and to entertain themselves for long period of time; they are impatient, hurry children, and do tasks for children that they could do themselves.
• Adults recognize that, although 3-year-olds are usually more cooperative than toddlers and want to please adults, they may revert to toddler behavior (thumb-sucking, crying, hitting, baby talk) when they are feeling shy or upset, especially in a new situation. Adults know that 3-year-olds' interest in babies, and especially their own recent infancy, is an opportunity for children to learn about themselves and human development.	• Adults expect too much of 3-year-olds and ridicule them when they behave immaturely or play baby ("You're acting like a baby!").
• Adults provide opportunities for 3-year-olds to demonstrate and practice their newly developed self-help skills and their desire to help adults with dressing and undressing, toileting, feeding themselves (including helping with pouring milk or setting the table), brushing teeth, washing hands, and helping pick up toys. Adults are patient with occasional toileting accidents, spilled food, and unfinished jobs.	• Adults perform routine tasks (like dressing and cleaning up) for children because it is faster and less messy. Adults punish or shame children for toileting accidents and do not allow children to play with their food. Adults insist that children pick up all the toys every time.
• Adults know that growth rates may slow down and appetites decrease at this age. Children are encouraged to eat "tastes" in small portions with the possibility of more servings if desired.	• Adults serve children a large meal which they are expected to eat. Disciplinary pressures accompany demands for food consumption.
• Adults guide 3-year-olds to take naps or do restful activities periodically throughout the day, recognizing that these younger children may exhaust themselves — especially when trying to keep up with older children in the group.	• Naptime is either forced or not provided. Children are scolded for being cranky or tired as the day progresses.

3-YEAR-OLDS 3-YEAR-OLDS 3-YEAR-OLDS 3-YEAR-OLDS

APPROPRIATE Practice	INAPPROPRIATE Practice
• Adults provide many opportunities for 3s to play by themselves; next to another child (parallel play), or with one or two other children. Adults recognize that 3-year-olds are not comfortable with much group participation. Adults read a story or play music with small groups and allow children to enter and leave the group at will.	• Adults expect children to participate in whole group activities. They read a story to all the children at once, expecting them all to sit and listen quietly. They do not allow children to leave the large group activity.
• Adults support children's beginning friendships, recognizing that such relationships ("my best friend") are short-lived and may consist of acting silly together or chasing for a few minutes. When conflicts arise, the 3-year-old will often return to playing alone. Adults encourage children to take turns and share but do not always expect children to give up favored items.	• Adults expect that children will always want to play with their "friends" and require that they do activities together or share toys. Adults pick out friends for children and keep pairs together over time.
• Adults provide plenty of space and time indoors and outdoors for children to explore and exercise their large muscle skills like running, jumping, galloping, riding a tricycle, or catching a ball, with adults close by to offer assistance as needed.	• Adults restrict children's physical activity ("No running!") or provide limited space and little equipment for large muscle outdoor activity. Adults limit large muscle activity to a short outdoor recess time.
• Adults provide large amounts of uninterrupted time for children to persist at self-chosen tasks and activities and to practice and perfect their newly developed physical skills if they choose.	• Adults become impatient with children who want to repeat a task or activity again and again, OR they force children to repeat tasks that adults have selected as learning activities whether the child is interested or not.
• Adults provide many materials and opportunities for children to develop fine motor skills such as puzzles, pegboards, beads to string, construction sets, and art materials (crayons, brushes, paints, markers, play dough, blunt scissors). Although children's scribbles are more controlled than those of toddlers, and 3-year-olds will create designs with horizontal and vertical strokes, and will sometimes name their drawings and paintings, adults do not expect a representational product. Art is viewed as creative expression and exploration of materials.	• Adults expect children to demonstrate fine motor skills by cutting out figures or shapes, by coloring within the lines in coloring books or on ditto sheets, or following the teacher's directions and model to create identical art products. When children draw or paint pictures, teachers ask "What is it?" and lead children to believe that only a representational picture is valued.

APPROPRIATE Practice	**INAPPROPRIATE Practice**
• Adults provide plenty of materials and time for children to explore and learn about the environment, to exercise their natural curiosity, and to experiment with cause and effect relationships. For example, they provide blocks (that children line up first and later may build into towers); more complex dramatic play props (for playing work and family roles and animals); sand and water with tools for pouring, measuring, and scooping; many toys and tools to experiment with like knobs, latches, and any toy that opens, closes, and can be taken apart; and simple science activities like blowing bubbles, flying kites, or planting seeds.	• Adults may provide blocks and dramatic play areas but have definite ideas about how these areas should be used and restrict materials to the designated area of the room. Water play and sand play are not provided because they are too messy and difficult to supervise. Adults do not provide toys and tools to use in take-apart activities because they require too much time to clean up.
• Adults encourage children's developing language by speaking clearly and frequently to individual children and listening to their response. Adults respond quickly and appropriately to children's verbal initiatives. They recognize that talking may be more important than listening for 3-year-olds. Adults patiently answer children's questions ("Why?" "How come?") and recognize that 3-year-olds often ask questions they know the answers to in order to open a discussion or practice giving answers themselves. Adults know that children are rapidly acquiring language, experimenting with verbal sounds, and beginning to use language to solve problems and learn concepts.	• Adults attempt to maintain quiet in the classroom and punish children who talk too much. Adults speak to the whole group most of the time and only speak to individual children to admonish or discipline them. Adults ridicule children's asking of rhetorical question by saying "Oh, you know that."
• Adults provide many experiences and opportunities to extend children's language and musical abilities. Adults read books to one child or a small group; recite simple poems, nursery rhymes and finger plays; encourage children to sing songs and listen to recordings; facilitate children's play of circle and movement games like London Bridge, Farmer in the Dell, and Ring Around the Rosie; provide simple rhythm instruments; listen to stories that children tell or write down stories they dictate; and enjoy 3-year-olds' sense of humor.	• Adults limit language and music activities because children sometimes become too silly or loud, OR they include story time and music time only as a whole group activity and require children to participate. Adults discipline children for using silly or nonsense language.

APPROPRIATE Practice	INAPPROPRIATE Practice
• Adults know that 3-year-olds do not usually understand or remember the rules. Guidance reasons that are specific to a real situation and that are demonstrated repeatedly are more likely to impress young children.	• Adults expect children to remember and abide by a list of classroom rules. Children are scolded and belittled for not remembering and applying a rule.
• Adults provide a safe, hazard-free environment and careful supervision. Adults recognize that 3-year-olds often overestimate their newly developed physical powers and will try activities that are unsafe or beyond their ability (especially in multiage groups where they may model 4- and 5-year-olds). Adults protect children's safety in these situations while also helping them deal with their frustration and maintain their self-confidence ("Joel can tie his shoe because he's 5; when you're 5, you'll probably know how to tie, too.").	• Adults are careless about supervision especially when 3-year-olds are in a group of mostly 4- and 5-year-olds who are capable of more self-monitoring and control of their own bodies.

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See references on pages 14-16, 32-33, and 61.

INTEGRATED COMPONENTS OF APPROPRIATE AND INAPPROPRIATE PRACTICE FOR 4- AND 5-YEAR-OLD CHILDREN

Component	APPROPRIATE Practice	INAPPROPRIATE Practice
Curriculum goals	• Experiences are provided that meet children's needs and stimulate learning in all developmental areas — physical, social, emotional, and intellectual.	• Experiences are narrowly focused on the child's intellectual development without recognition that all areas of a child's development are interrelated.
	• Each child is viewed as a unique person with an individual pattern and timing of growth and development. The curriculum and adults' interaction are responsive to individual differences in ability and interests. Different levels of ability, development, and learning styles are expected, accepted, and used to design appropriate activities.	• Children are evaluated only against a predetermined measure, such as a standardized group norm or adult standard of behavior. All are expected to perform the same tasks and achieve the same narrowly defined, easily measured skills.
	• Interactions and activities are designed to develop children's self-esteem and positive feelings toward learning.	• Children's worth is measured by how well they conform to rigid expectations and perform on standardized tests.
Teaching strategies	• Teachers prepare the environment for children to learn through active exploration and interaction with adults, other children, and materials.	• Teachers use highly structured, teacher-directed lessons almost exclusively.
	• Children select many of their own activities from among a variety of learning areas the teacher prepares, including dramatic play, blocks, science, math, games and puzzles, books, recordings, art, and music.	• The teacher directs all the activity, deciding what children will do and when. The teacher does most of the activity for the children, such as cutting shapes, performing steps in an experiment.
	• Children are expected to be physically and mentally active. Children choose from among activities the teacher has set up or the children spontaneously initiate.	• Children are expected to sit down, watch, be quiet, and listen, or do paper-and-pencil tasks for inappropriately long periods of time. A major portion of time is spent passively sitting, listening, and waiting.

4- AND 5-YEAR-OLDS	4- AND 5-YEAR-OLDS	4- AND 5-YEAR-OLDS
Component	**APPROPRIATE Practice**	**INAPPROPRIATE Practice**
	• Children work individually or in small, informal groups most of the time.	• Large group, teacher-directed instruction is used most of the time.
	• Children are provided concrete learning activities with materials and people relevant to their own life experiences.	• Workbooks, ditto sheets, flashcards, and other similarly structured abstract materials dominate the curriculum.
	• Teachers move among groups and individuals to facilitate children's involvement with materials and activities by asking questions, offering suggestions, or adding more complex materials or ideas to a situation.	• Teachers dominate the environment by talking to the whole group most of the time and telling children what to do.
	• Teachers accept that there is often more than one right answer. Teachers recognize that children learn from self-directed problem solving and experimentation.	• Children are expected to respond correctly with one right answer. Rote memorization and drill are emphasized.
Guidance of social-emotional development	• Teachers facilitate the development of self-control in children by using positive guidance techniques such as modeling and encouraging expected behavior, redirecting children to a more acceptable activity, and setting clear limits. Teachers' expectations match and respect children's developing capabilites.	• Teachers spend a great deal of time enforcing rules, punishing unacceptable behavior, demeaning children who misbehave, making children sit and be quiet, or refereeing disagreements.
	• Children are provided many opportunities to develop social skills such as cooperating, helping, negotiating, and talking with the person involved to solve interpersonal problems. Teachers facilitate the development of these positive social skills at all times.	• Children work individually at desks or tables most of the time or listen to teacher directions in the total group. Teachers intervene to resolve disputes or enforce classroom rules and schedules.

4- AND 5-YEAR-OLDS	4- AND 5-YEAR-OLDS	4- AND 5-YEAR-OLDS
Component	**APPROPRIATE Practice**	**INAPPROPRIATE Practice**
Language development and literacy	• Children are provided many opportunities to see how reading and writing are useful before they are instructed in letter names, sounds, and word identification. Basic skills develop when they are meaningful to children. An abundance of these types of activities is provided to develop language and literacy through meaningful experience: listening to and reading stories and poems; taking field trips; dictating stories; seeing classroom charts and other print in use; participating in dramatic play and other experiences requiring communication; talking informally with other children and adults; and experimenting with writing by drawing, copying, and inventing their own spelling.	• Reading and writing instruction stresses isolated skill development such as recognizing single letters, reciting the alphabet, singing the alphabet song, coloring within predefined lines, or being instructed in correct formation of letters on a printed line.
Cognitive development	• Children develop understanding of concepts about themselves, others, and the world around them through observation, interacting with people and real objects, and seeking solutions to concrete problems. Learnings about math, science, social studies, health, and other content areas are all integrated through meaningful activities such as those when children build with blocks; measure sand, water, or ingredients for cooking; observe changes in the environment; work with wood and tools; sort objects for a purpose; explore animals, plants, water, wheels and gears; sing and listen to music from various cultures; and draw, paint, and work with clay. Routines are followed that help children keep themselves healthy and safe.	• Instruction stresses isolated skill development through memorization and rote, such as counting, circling an item on a worksheet, memorizing facts, watching demonstrations, drilling with flashcards, or looking at maps. Children's cognitive development is seen as fragmented in content areas such as math, science, or social studies, and times are set aside to concentrate on each area.

4- AND 5-YEAR-OLDS	4- AND 5-YEAR-OLDS	4- AND 5-YEAR-OLDS
Component	**APPROPRIATE Practice**	**INAPPROPRIATE Practice**
Physical development	• Children have daily opportunities to use large muscles, including running, jumping, and balancing. Outdoor activity is planned daily so children can develop large muscle skills, learn about outdoor environments, and express themselves freely and loudly.	• Opportunity for large muscle activity is limited. Outdoor time is limited because it is viewed as interfering with instructional time or, if provided, is viewed as recess (a way to get children to use up excess energy), rather than an integral part of children's learning environment.
	• Children have daily opportunities to develop small muscles skills through play activities such as pegboards, puzzles, painting, cutting, and other similar activities.	• Small motor activity is limited to writing with pencils, or coloring predrawn forms, or similar structured lessons.
Aesthetic development	• Children have daily opportunities for aesthetic expression and appreciation through art and music. Children experiment and enjoy various forms of music. A variety of art media are available for creative expression, such as easel and finger painting and clay.	• Art and music are provided only when time permits. Art consists of coloring predrawn forms, copying an adult-made model of a product, or following other adult-prescribed directions.
Motivation	• Children's natural curiosity and desire to make sense of their world are used to motivate them to become involved in learning activities.	• Children are required to participate in all activities to obtain the teacher's approval, to obtain extrinsic rewards like stickers or privileges, or to avoid punishment.
Parent-teacher relations	• Teachers work in partnership with parents, communicating regularly to build mutual understanding and greater consistency for children.	• Teachers communicate with parents only about problems or conflicts. Parents view teachers as experts and feel isolated from their child's experience.
Assessment of children	• Decisions that have a major impact on children (such as enrollment, retention, assignment to remedial classes) are based primarily on information obtained from observations by teachers and parents, not on the basis of a single test score. Developmental assessment of children's progress and achievement is used to plan curriculum, identify children with special needs, communicate with parents, and evaluate the program's effectiveness.	• Psychometric tests are used as the sole criterion to prohibit entrance to the program or to recommend that children be retained or placed in remedial classrooms.

4- AND 5-YEAR-OLDS	4- AND 5-YEAR-OLDS	4- AND 5-YEAR-OLDS
Component	**APPROPRIATE Practice**	**INAPPROPRIATE Practice**
Program entry	• In public schools, there is a place for every child of legal entry age, regardless of the developmental level of the child. No public school program should deny access to children on the basis of results of screening or other arbitrary determinations of the child's lack of readiness. The educational system adjusts to the developmental needs and levels of the children it serves; children are not expected to adapt to an inappropriate system.	• Eligible-age children are denied entry to kindergarten or retained in kindergarten because they are judged not ready on the basis of inappropriate and inflexible expectations.
Teacher qualifications	• Teachers are qualified to work with 4- and 5-year-olds through college-level preparation in Early Childhood Education or Child Development and supervised experience with this age group.	• Teachers with no specialized training or supervised experience working with 4- and 5-year-olds are viewed as qualified because they are state certified, regardless of the level of certification.
Staffing	• The group size and ratio of teachers to children is limited to enable individualized and age-appropriate programming. Four- and 5-year-olds are in groups of no more than 20 children with two adults.	• Because older children can function reasonably well in large groups, it is assumed that group size and number of adults can be the same for 4- and 5-year-olds as for elementary grades.

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LEVEL: ADMINISTRATOR

GOAL: **#1** Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: Participants will know developmental expectations and how they impact on program delivery in various settings: itinerant-based, integrated preschool, and special classroom.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Small group activity Match ages to developmental expectations.	2. Worksheet (A-W1) *Appropriate Activities at Age and Development*	2. Do quickly. May divide participants into groups. Important to have participants find out what is included in the charts and become familiar with the concept. Included in training information is a Handout (A-H2) listing many expectations. It is sometimes used by the County Health Clinics and is a good resource for distribution. If possible, each participant should receive a copy of *Developmentally Appropriate Practices in Early Childhood Programs Serving Children From Birth Through Age 8.* Discuss how developmental expectations impact on service delivery for young children and how they relate to young children's behavior.

A-W1

APPROPRIATE ACTIVITIES AT AGE AND DEVELOPMENT

DIRECTIONS: Using charts, locate the ages when these skills are appropriate.

ACTIVITY	AGE
Uses toilet with few accidents	
Can copy simple designs	
Can follow simple instructions with more than one step	
Can balance first on one foot and then another	
Can learn his first and last name	
Can be understood by people out of the family	
Can wash hands after restroom, lunch, or an activity	
Knows 2 to 5 colors; counts to 3	
Can catch a ball bounced to him	
Understands "Let's Pretend"	
Rides a tricycle; steers wheeled toys	
Says sentences of three or more words	
May join in play with other children	
May revert to baby or toddler behaviors	
Will want to do things for self	
Should be encouraged to share, but may not give up a prized possession	
Scribbles	
Plays freely with blocks, puzzles, toys	
Does not understand or follow rules	
Listens to stories, poems, fingerplays	
Asks who, what, why questions	
Points to and names six colors	
Draws, names and describes a recognizable picture	
Prints a few capital letters	

LEVEL: ADMINISTRATOR

GOAL: **#1** Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: SKILL

OBJECTIVE: Participants will select appropriate practices for preschoolers ages 3-5 based on developmental appropriateness.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Read and discuss the NAEYC definition of developmentally appropriate practice.	1. Handout/Transparency (A-H4, A-T1) *Definition of Developmental Appropriateness*	1. Using the Transparency and Handout, discuss the importance of basing a preschool program on developmentally appropriate practices which take into account both age appropriateness and individual appropriateness. Perhaps the most important concept from this series of activities aimed at the administrative audience is that of the appropriateness of the program for a good understanding of the concept will impact the support available to the preschool staff in curriculum, materials, environment, and expectations.

A-H4

DEFINITION OF DEVELOPMENTAL APPROPRIATENESS

NATIONAL ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN

November 1986

The concept of developmental appropriateness has two dimensions: age appropriateness and individual appropriateness.

Age Appropriateness:

Human development research indicates that there are universal, predictable sequences of growth and change that occur in children during the first nine years of life. These predictable changes occur in all domains of development — physical, emotional, social, and cognitive. Knowledge of typical development of children within the age span served by the program provides a framework from which teachers prepare the learning environment and plan appropriate experiences.

Individual Appropriateness:

Each child is a unique person with an individual pattern and timing of growth, as well as individual personality, learning style, and family background. Both the curriculum and adults' interactions with children should be responsive to individual differences. Learning in young children is the result of interaction between the child's thoughts and experiences with materials, ideas, and people. These experiences should match the child's developing abilities while also challenging the child's interest and understanding.

NAEYC, November 1986

A-T1

DEFINITION OF DEVELOPMENTAL APPROPRIATENESS

The concept of developmental appropriateness has two dimensions: age appropriateness and individual appropriateness.

Age Appropriateness:

Human development research indicates that there are universal, predictable sequences of growth and change that occur in children during the first nine years of life. These predictable changes occur in all domains of development — physical, emotional, social, and cognitive. Knowledge of typical development of children within the age span served by the program provides a framework from which teachers prepare the learning environment and plan appropriate experience.

National Association for the Education of Young Children, November 1986

Individual Appropriateness:

Each child is a unique person with an individual pattern and timing of growth, as well as individual personality, learning style, and family background. Both the curriculum and adults' interactions with children should be responsive to individual differences. Learning in young children is the result of interaction between the child's thoughts and experiences with materials, ideas, and people. These experiences should match the child's developing abilities while also challenging the child's interest and understanding.

National Association for the Education of Young Children, November 1986

LEVEL: ADMINISTRATOR

GOAL: #1 Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: SKILL (continued)

OBJECTIVE: Participants will select appropriate practices for preschoolers aged 3-5 based on developmental appropriateness.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Small group activity From descriptions, select appropriate practices for children aged 3-5 who are typically developing and for those with disabilities with sensitivity to other diversity issues (e.g., ability, cultural, racial, religious, gender, etc.). Selections should be made for itinerant-based, integrated preschool, and special class settings.	2. Handout/Transparency (A-H5) Use of developmental charts and definition of developmental appropriateness from previous activity will be used. Worksheets/Transparency (A-W2 and 3) List practices and determine appropriateness for different groups and settings.	2. With a group, the practices could be divided among teams for decision making. Service delivery models could also be divided. Sharing of decisions should generate some discussions that could bring disagreement. Referring to appropriate practice and developmental expectation Worksheets (A-W1) should assist in reaching agreement or at least initiating a healthy discussion. It is important that administrators recognize that preschool is not beginning kindergarten and that kindergarten activities are not developmentally appropriate for three and four year olds. Note how issues of diversity might affect these situations. Discuss how practices may influence children's behavior.

CASE STUDIES FOR DISCUSSION

Jona is three years old. He attends a community-based preschool with other three-year-olds. There are several children who have disabilities in the class of 16 children with a teacher and an aide. Twice a week Jona's "special friend," the itinerant preschool special education teacher from the public school, comes to the class to work with Jona. She works with him within the classroom. Other children want to join them which is encouraged. They work together and compliment each other when they complete a task or feel success. On one day, Jona refuses to work with the teacher. He chooses to continue to play with a firetruck away from all children. The teacher asks him to join them. When he doesn't, she joins him on the floor. He moves away. She returns to the group and they begin to work with the things she brought in her basket. All of the tasks are related to categorizing food into shapes. The other children get very excited about the surprises in her basket. One of the children tells Jona that he better come over because she has more "stuff" in the basket. Jona watches, turns his back, and then inches over to the group. The teacher hands him a cookie and asks him to put it with other circles. He does. The other children agree that he is right and say that he did a good job. From then on Jona works with the teacher and the other children. Near the end of the session, the teacher goes with Jona to the water table and the two of them play a search game. When she leaves, Jona and other children wave good-bye. The children go to the water table and play together.

Susan is a four-year-old who attends a half-day preschool center-based program for five days a week. Susan has just started in the preschool with six other children. All of the children have a disability. There is a wide range of disabilities. Susan has a very short attention span which appears to be inhibiting her language and cognitive development. While the teacher and aide recognize the differences in the children, they are also attempting to gain and sustain Susan's attention for longer periods of time. They have found that she does not play well with others, but will sustain attention longer when she plays house with her doll, a teddy bear, and one friend. The teacher has suggested that the two girls try some activities that are in the house. They are to be sure to invite the doll and bear to play. When they have completed the activity, the teacher would like to be invited to join them. The girls play with their toys and using the suggested activities, set the table (following a model), pretend to fix the food, and then ask the teacher to join. Language activities follow as the teacher, friend, Susan, bear, and doll participate in the party. As the party is ending, Susan asks two other children to join them. She has followed some simple directions, played, worked cooperatively with a friend, conversed with her friend and the teacher, and asked others to join them. She has played at this task for 25 minutes.

Fred is three years old. He does not attend a formal preschool program although he does play with other children in a neighborhood play group and at the bowling alley nursery once a week. He receives two hours of itinerant teacher service and an hour of speech/language therapy per week. On a monthly basis the occupational therapist works with his mother in a consultative role and observes Fred for a portion of the hour. Fred is not talking. He seems to get what he wants through a variety of motions and noises. There does not appear to be any physical reason for his language disability. He seems to have average or above receptive skills as can be seen by his response to all conversations. The itinerant teacher, speech/language therapist, and occupational therapist are attempting to work with Fred and his family to start a communication process. Other family members are being cautioned to let him represent himself instead of thinking for him.

A-H6

Taunya is a five-year-old child with Down Syndrome. She seems to have relatively strong cognitive and language skills. Her gross and fine motor skills are developing more slowly. She is quite social and can be quite headstrong at times. She is from a large family where she experiences many activities with other children. She is in a regular kindergarten class each morning. Twice a week the itinerant teacher comes to her class and spends time with her. The occupational therapist provides consultative services to the kindergarten teacher and the preschool specialist. The physical therapist works with her twice a month and provides consultative services to the physical education teacher. When Taunya becomes willful and unable to follow directions, the teachers have developed a plan that starts with redirection and then specific limits. They have found that her favorite activity is story time where she is quite involved in the language activities. If Taunya is unable to gain self-control when she has been beyond the limits, she is not allowed to sit in the circle for story time. They have found that the idea of missing the group story time is meaningful to her. As a result, they are now able to remind her that she must stay within the limits so that she can come to the circle. She does react to praise when she follows directions, so they also praise her whenever possible. They are finding fewer instances of willful behavior.

INAPPROPRIATE PRACTICES	REASONS

A-W3

For use with case studies.

Appropriate Practice	Check Appropriateness				
	Typically Developing	Child with a Disability	Itinerant	Integrated	Special Class
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

LEVEL: ADMINISTRATOR

GOAL: **#1** Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: SKILL *(continued)*

OBJECTIVE: Participants will select appropriate practices for preschoolers aged 3-5 based on developmental appropriateness.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
3. Participants will determine a half-day daily schedule for a school setting or an hour plan for an itinerant setting that provides for developmentally appropriate activities.	3. Worksheets/Transparency (A-W4 and 5) *Schedule* Worksheet for daily plan (2 one-half hours) Worksheet for one hour home session.	3. Other modules that could be helpful are "Play," "Family," and "Planning." After a few minutes, let participants share plans and critique them. Note how the schedule may influence children's behavior.

A-W4

SCHEDULE

PERFECT PRESCHOOL, PERFECT CITY, OHIO

9:00 — 11:30

ACTIVITY	DEVELOPMENTAL PURPOSE
9:00 ARRIVAL	
9:30	
10:00	
10:30	
11:00	
11:30 DISMISSAL	

A-W5

SCHEDULE

ITINERANT-BASED PRESCHOOL PROGRAM
PERFECT CITY SCHOOLS

One Hour Sessions

Juan is three years old. He is developing at about one year behind typically developing peers in language, adaptive behavior and language.

Susan is five years old and has never attended any preschool. She is an only child and has little experience with other children. Her parents think she will outgrow her short attention span and willful behavior.

Sarah is four years old. She attends a preschool for typically developing peers in a church three days a week. She has Down Syndrome, but seems to be functioning at a low average level cognitively. Receptive language is much stronger than expressive language.

LEVEL: ADMINISTRATOR

GOAL: #1 Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: VALUE/ATTITUDE

OBJECTIVE: Participants will value the importance of developmental issues in setting the stage for success in a preschool setting.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large or small group activity Given appropriate and inappropriate examples of strategies, instructional methods, and curriculum, participants will name strengths and weaknesses of each based on developmental appropriateness.	1. Handout/Transparency (A-H7, A-T2) One appropriate and one inappropriate example for each (strategy, instructional method, and curriculum) Worksheet (A-W6) *Strengths and Weaknesses*	1. If Transparency is used, hand out strength/weakness sheet for notes. Note how these strategies, methods, etc. either support or detract from the development of self-control in young children.

CURRICULUM

The ABC preschool curriculum is very focused on preparing children academically for Kindergarten according to the information prepared for parents. The children arrive each day and put their belongings away. They are to work in various centers on a free choice basis until all children have arrived. At that point they start calendar time. Each day the group discusses the date, weather, special activities and then does a song or finger play. The group has a large repertoire of songs and finger plays. Each day two children lead the group in a favorite of their choice. A letter a week is introduced. The children are expected to be able to name it, recognize it, print it (upper and lower case), give its sound and are encouraged to name words that begin with the sound. Repeated drill of these skills occurs each day for previously learned letters. Children go to the table for group language arts after calendar time. They are given lined paper and asked to write their name and practice the new letter and one review letter for several lines. A group project that relates to the letter is then presented. The teacher gives the children pieces of an art project that are cut out and asks them to glue them in a prescribed manner. All of the projects look much the same. After language time, the children get their snack and converse during snack time. They are encouraged to use good manners during eating. After a restroom break, the children return to the table where they work on number readiness. The goal is that each child will be able to count to 20, recognize numbers to 10, match number to sets to 10, describe sets as more, less, or the same, and write numbers in order and from dictation to 10. The morning ends with play time, a story, and then clean-up. Several times a week the children go to the gym for large motor activities. The preschool prides itself on how well its children are prepared for Kindergarten.

The XYZ preschool curriculum considers itself to be a child-centered curriculum that provides many experiences for children before they enter Kindergarten. There are many centers in the room. The staff prides itself on developing centers that provide children with many opportunities to use language with their peers, play in a small group setting, and develop small and large motor skills through the use of a variety of equipment. The children arrive at school, put their belongings away, and then select a center or activity. Teachers go between centers, sit on the floor with the children, and interact with them throughout the morning. Their goals include increasing receptive and expressive language skills, fostering growth in socialization skills, aiding growth in motoric development, enhancing self-esteem, and providing for the growth of self-control in the children. They watch for the "teachable moments" throughout the morning and work with individual children or small groups of children. The children are encouraged to participate in some whole group activities such as story time, rhythmic activities, and snack time; however, children do not have to join the whole group. There are many opportunities for children to "pretend." Rules and regulations are kept to a minimum, but children are expected to follow the rules. Positive discipline methods are used.

STRATEGIES

When a child wants to play at a center instead of join the large group, the teacher or aide talks quietly with the child, takes him by the hand, and walks to the large group staying with him to help him adjust to the large group. If he chooses to leave the group, he is not allowed to return to the center. Instead, he must go to the "quiet corner", a chair in the far corner of the room where there are no distractions. He may return to the large group or stay in the chair.

When it is story time, the teacher makes a five minute anticipatory statement. The children are told that she will be reading a story about a picnic for bears in the story corner in a few minutes. She would like to have those who want to read the story join her after they have finished their activity and put it away. She then lets the children finish their activity, rings a bell and goes to the story center. When several children are there, she begins to talk about the story with the children. She reads the story. If children do not come to the story hour, they are not punished or challenged. Most children join the group. Even those who are still in the centers seem to listen to the story.

INSTRUCTIONAL METHOD

The children sit at the activity tables. The teacher shows them a finished example of the activity they are to do. He then shows them how they are to do it, being careful to tell them the order that must be followed. They will be given cut out pieces that are to be glued into place. When they are finished gluing, they may decorate one part with crayons. They are to put their name on the back of the paper. He will show them each step so they can do it just right.

The children are seated at the activity tables. The teacher has used an art project during the story that she just read to them. She asks if they would like to make something like it. She then hands out scissors and construction paper cut into fourths. She tells them to wait to get started until everyone is ready. Using the scissors she models how to cut the first part. She says to the children, "Try to cut it about this big and about this shape. If you need help, ask a neighbor or me." She walks around the table helping those children who are unable to attempt it and encouraging those who are cutting. She continues with similar steps until the project is completed, helping some children, complimenting others. When they are finished, she encourages all of them to show each other and appreciate each other's work. The projects show individual creativity and differences in skill acquisition.

CURRICULUM

ABC PRESCHOOL

FOCUS:	Preparation for Kindergarten
STRUCTURE:	Established routine with a variety of structured/unstructured activities spread throughout the day
CURRICULUM:	• Language, letter acquisition, handwriting, socialization, manners, art projects, pre-math (numbers 1-10), gross motor development • Table work • Teacher-initiated activities and child-selected activities

CURRICULUM

XYZ PRESCHOOL

FOCUS: Child-centered, experience based

STRUCTURE: Established routine with a variety of centers.

CURRICULUM:

- Language, play, development of small and large motor skills, socialization growth, self-control
- Adults move among centers focusing on “teachable moments”
- Few large group required activities

A-T2

STRATEGIES

- Adults attempt to direct or lead children to adult-selected activities
- Time out chair
- Child decides when to return to group
- Anticipatory transition
- Children make choices
- No adult generated consequences for choice

INSTRUCTIONAL METHOD

- Children sit at tables
- Teacher shows a finished sample
- Teacher shows them procedure
- Parts handed out for gluing
- Children decorate
- Children put name on back
- All products look similar

A-T2

INSTRUCTIONAL METHOD

- Children seated at activity tables
- Story has been read with use of a paper prop
- Children asked to make prop
- Children encouraged to follow directions as well as they can
- Provision is made for individual levels
- Help is available and encouraged
- Creativity is encouraged

DEVELOPMENTALLY APPROPRIATE? INAPPROPRIATE?

DIRECTIONS: List those developmentally appropriate or inappropriate practices in each example.

1.

2.

3.

4.

5.

6.

LEVEL: ADMINISTRATOR

GOAL: **#1** Gain competency in the concept of developmental appropriateness for young children with disabilities and those who are typically developing as an element in the development of self-control.

COMPETENCY TYPE: VALUE/ATTITUDE *(continued)*

OBJECTIVE: Participants will be aware of the importance of developmental issues in setting the stage for success in a preschool setting.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Large group activity Participants will develop a list of five things they can do as administrators of programs for preschoolers that will promote developmentally appropriate practice.	2. Worksheet/Transparency (A-W7) *What Can I Do?*	2. After participants have had a few minutes to write down five ideas, ask them to share them. As a group, attempt to consolidate ideas into five things that include all essential concepts.

WHAT CAN I DO?

As an administrator of a school with a preschool program in it, what are five important things I can do that support the belief in the importance of a developmentally appropriate program. These should include the children, their family, and the community.

1.

2.

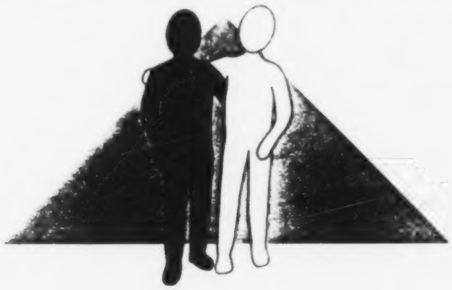
3.

4.

5.

GOAL 2

Managing Behaviors



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LEVEL: ADMINISTRATOR

GOAL: #2 Gain competency in the concept of developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

COMPETENCY TYPE: KNOWLEDGE

OBJECTIVE: Participants will describe an appropriate setting for preschoolers as they differ from school-age settings.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Participants will review the considerations checklist for estimating the start up cost of a preschool program that is developmentally appropriate Discuss how this issue relates to helping young children learn self-control.	1. Handouts/Transparency **Information Sheets** *Considerations Checklist* (A-H8) *Center-Based Services* (Ohio Department of Education (A-H9) *Itinerant Services* (Ohio Department of Education) (A-H10) *Rules for Preschool Programs* (Ohio Department of Education — all portions) (A-H11) *Rules for the Education of Preschool Children with Disabilities Served by Public Schools and County Boards of Mental Retardation* (Ohio Department of Education) (3301-31-03) (A-H12) *Classroom Areas for Developmental Skill Enhancement* (Huron County Public Schools) (A-H13) *Equipment and Supplies List* (Ohio Department of Education, Preschool Guidelines, Suburban Model) (A-H14) *Comparing Preschool and School-Age Settings* (A-H15)	1. Review the checklist and reference to the Handouts may be necessary in some cases. The leader may wish to distribute all the Handouts before presenting the materials. All the Handouts are backup material for presentation. Not all Handouts must be distributed. Reading: *Rules for Preschool Programs.* Chapter 3301-37. Ohio Department of Education, Columbus, OH. All revised 1991. *Rules for the Education of Preschool Children with Disabilities Served by Public Schools and County Boards of Mental Retardation and Developmental Disabilities.* Chapter 3301-31. Ohio Department of Education, Columbus, OH. (3301-31-03). The leader may wish to encourage a discussion on the differences of the floor plans and play areas before continuing on with the presentation. *(continued on next page)*

LEVEL: ADMINISTRATOR *(continued)*

GOAL: **#2** Gain competency in the concept of developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: Participants will describe an appropriate setting for preschoolers as they differ from school-age settings.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
	Floor Plans (A-H16) *Intermediate classroom* *Kindergarten classroom* *Preschool classroom #1* *Preschool classroom #2* *Preschool classroom #3* *Elementary playground* *Preschool Fenced in Play Area YMCA* *Preschool Courtyard*	Ask participants how issues of diversity (ability, cultural, racial, religious, gender, etc.) need to be addressed through program set-up.

A-H8

CONSIDERATIONS CHECKLIST

This is a list of factors to take under consideration when estimating the start-up cost and the additional costs of a developmentally sound preschool.

1. The unique needs of the children the preschool will be serving (i.e. the adaptive equipment needed such as wheeled floor sitters, trull, trapp, tripp tricycles, adjustable crawlers, well-defined boundaries, wheelchair accessible, or reasonably level).

2. The type of class to be started (i.e. special class, shared class, mainstreamed, reverse mainstreamed, or itinerant).

3. The number of classes to be started and the size of each class as stated in the *Rules for the Education of Preschool Children with Disabilities Served by Public Schools and County Boards of Mental Retardation and Developmental Disabilities* and *Rules for Preschool Programs Chapter 3301-37* Revised 1991.

4. The number of personnel needed for each preschool class.

5. The type of facility to be used (i.e. an old high school, a rented location, a YMCA, or any other location for a preschool).

6. The number of areas for developmental skill enhancement the school or district has the funds to create. It also depends on how well the school or district is stocked with such things as listening or reading materials, art supplies, large muscle equipment, manipulatives, writing, drawing, or construction materials, science materials, or dramatic play materials for such areas.

7. The amount of money available within the school or district. (Funding through grants or federal, state, or local means).

8: The number of years the school wishes to project the cost of running a preschool.

9. The room layout and play area layout for developmental skill enhancement.

CENTER-BASED SERVICES

Center-based services are defined as classroom programs that provide group educational experiences to children of similar ages or developmental levels on a regularly scheduled basis and in a central location. The center-based model includes several possible methods of service delivery:

- **Shared Classroom.** In this arrangement one class for children with disabilities and one class for typically developing children share the same classroom space. Teachers "team plan and teach."

- **Enrollment of Typical Peers.** In this arrangement up to six age-eligible typically developing children are enrolled in a special class for the purpose of establishing an integrated class setting.

- **Mainstreaming.** In this arrangement children with disabilities are enrolled in a special class and also participate in planned activities that take place within preschool programs for typically developing children.

- **Reverse Mainstreaming.** In this arrangement children who are enrolled in programs for typically developing children participate in some of the activities that take place within the special class setting.

- **Separate Class.** In this arrangement children with disabilities are enrolled in a special class with no planned interaction with typically developing, age-mate children. In this case the nature and degree of disability that necessitates separate class placement must be well documented.

Ohio Department of Education, Division of Early Childhood. *Rules Implementation Monograph.* (Series 2, Draft 3/91).

ITINERANT SERVICES

Itinerant services are defined as services provided by preschool special education teachers or related services personnel which occur in the setting where the child or the child and parent(s) are located as opposed to providing services at a centralized location. The itinerant model includes two methods of service delivery:

- Services delivered in the home environment;
- Services delivered to children attending a preschool/kindergarten program for typically developing children.

Home environment is defined as the residence of the child and the child's parent(s). In addition to providing itinerant services to children attending a public school preschool or kindergarten program, services may also be provided to children attending a licensed community-based preschool/kindergarten where a qualified staff member is assigned to the child.

Ohio Department of Education, Division of Early Childhood. *Rules Implementation Monograph*. (Series 2, Draft 3/91).

PROGRAM SECTION OF:

RULES FOR THE EDUCATION OF PRESCHOOL CHILDREN WITH DISABILITIES SERVED BY PUBLIC SCHOOLS AND COUNTY BOARDS OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES

3301-31-03 PROGRAM

(A) The education program shall

(1) Be designed to provide a developmentally appropriate curriculum which addresses developmental age and individual exceptionalities;

(2) Include the following developmental domains:

(a) Adaptive,
(b) Aesthetic,
(c) Cognitive,
(d) Communication,
(e) Sensorimotor,
(f) Social-Emotional; and

(3) Include parent involvement.

(B) The data from the child's multifactored evaluation *(MFE)* and individualized education program *(IEP)* shall be available to and used by the preschool special education teacher in the planning and coordination of the child's developmental program.

(C) Alternative service delivery options shall be available which may include:

(1) Itinerant services which may be delivered in the home environment or to a child attending a preschool/kindergarten program administered by a public school or a child attending a community-based preschool/kindergarten or child-care program that meets the requirements of Chapter 5104. of the Revised Code and where a qualified preschool staff member is assigned to the child; and

(2) Special class located in an integrated or separate facility.

(D) The strengths and needs of each child and family shall provide the basis for making decisions regarding placement in the least restrictive environment.

(E) In addition to their primary instructional responsibilities, preschool special education teachers may provide the following:

(1) Instruction to nondisabled children in an integrated setting,

(2) Assessment and consultation, and

(3) Activities related to parent involvement.

(F) Activities for parent involvement may include, but are not necessarily limited to

(1) Education,

(2) Family support services,

(3) Linkage with other resources, and

(4) Transition planning.

(G) One preschool itinerant teacher shall serve 10 to 20 preschool children with disabilities.

(H) One preschool special class teacher shall serve six to eight preschool children with disabilities. The maximum caseload shall be eight for one half-day program or one full-day program, and 16 for two half-day programs. The age range shall not exceed 36 months and class size shall not exceed eight children with disabilities at any one time.

(I) A combination itinerant and special class teacher shall serve 12 to 16 preschool children with disabilities.

(J) Up to six age-eligible typically developing children may be enrolled in a special class for the purpose of establishing an integrated class setting. In such cases, class size shall not exceed 12 children at any one time.

(K) In addition to the preschool special class teacher, at least one responsible individual shall be present at all times when seven or more children are in attendance in a special class setting.

(L) Unless otherwise specified on the IEP, a minimum of four hours of services per month shall be provided for each child receiving itinerant services and a minimum of 10 hours of services per week shall be provided for each child receiving special class services.

(M) Activities shall be conducted that address the transition of preschool children with disabilities and their families between and within service delivery systems. Related activities may include, but are not necessarily limited to:

  (1) Development of interagency agreements to clarify transition options;

  (2) Development of forms and procedures for sharing pertinent information among agency personnel and parents;

  (3) Transfer of personally identifiable information prior to the age at which children may be eligible for preschool or school-age services;

  (4) Provision of information for parents regarding service options; and

  (5) Provision of an individual planning conference and/or written transition plan for each child and family.

(N) Housing, facilities, materials, and equipment shall be maintained in accordance with rule 3301-37-06 of the Administrative Code, except paragraph (f) of said rule, and rule 3301-37-07 of the Administrative Code, except paragraph (f) of said rule. In addition the following shall apply:

  (1) The indoor and outdoor physical environment shall be accessible and appropriate to the needs of preschool children with disabilities;

  (2) Evaluation instruments, instructional materials, and equipment as well as adaptive equipment shall be appropriate for the age, developmental ability, and disability of each preschool child.

(O) Rules 3301-37-02, 3301-37-04, 3301-37-05, 3301-37-09, 3301-37-10, and 3301-37-11 of the Administrative Code shall be followed in the provision of programs for preschool children with disabilities.

(P) Related services and adapted physical education provided for preschool children with disabilities in accordance with rule 3301-51-05 of the Administrative Code, except paragraph (n)(1) of said rule, may:

- (1) Include consultative, indirect, and direct services;
- (2) Be provided in alternative settings as outlined in paragraph (C) of this rule; and
- (3) Be considered a special education program if they provide specially designed instruction to meet the unique needs of a preschool child with a disability and no other special education program is currently being provided to that child.

(Q) Program evaluation activities shall be conducted for the purpose of making decisions regarding program maintenance and improvement.

(R) Experimental special education programs or related services for preschool children with disabilities may be approved outside these rules by the Department of Education, Division of Early Childhood Education, to evaluate new methodology and/or alternative procedures in accordance with a request for proposal issued by the Division of Early Childhood Education. A recommendation for the design and issuance of a request for proposal may be submitted to the Division of Early Childhood Education.

Effective:

CERTIFICATION

DATE

Promulgated under: R.C. Chapter 119.
Rule authorized by: Sections 3301.07 (J); 3317.032; 3317.05; 3323.02 to 3323.08; 3301.53 to 3301.57.

Rule amplifies: Sections 3301.07 (J); 3317.032; 3317.05; 3323.02 to 3323.08; 3301.53 to 3301.57

Rules for Preschool Programs
Chapter 3301-37

Ohio Department of Education
Columbus, Ohio
Revised 1991

RULES FOR PRESCHOOL PROGRAMS
Effective Date August 5, 1988

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3301-37-01 Definitions.

(A) "Board of education" means the elected governing body of a school district or the governing body of a nonpublic school.

(B) "Child day-care program" means a program that is developmentally appropriate for the children enrolled in the program.

(C) "Class" means a group of children enrolled in the preschool program; maximum group size is specified in section 3301.56 of the Revised Code.

(D) "Department" means the Ohio Department of Education.

(E) "Director" means the person responsible for supervision of a preschool program. The director may be the head teacher or elementary principal.

(F) "Eligible nonpublic school" means a nonpublic school chartered as described in division (B)(8) of section 5104.02 of the Revised Code or chartered by the state board of education for kindergarten through grade six or grades one through six; kindergarten through grade eight or grades one through eight; or kindergarten through grade twelve or grades one through twelve.

(G) "Full-sized crib" means a crib which has an interior dimension greater than fifty-one inches (plus or minus five-eights inch) in length and twenty-seven and seven-eighths inches (plus or minus five-eighths inch) in width. With the mattress support in its lowest position and the crib side in its highest position, the vertical distance from the upper surface of the mattress support to the upper surface of the crib side and/or end panel shall not be less than twenty-six inches.

(H) "Handwashing facility" means a permanent-type fixture with running water which conforms to the requirements of the "Ohio Plumbing Code" in Chapter 4101:2-51 of the Administrative Code.

(I) "Head teacher" means a person hired to guide and instruct a class of preschool children enrolled in the program and who may supervise the preschool program.

(J) "Infant" means a child who is less than eighteen months of age.

(K) "Nonambulatory child" means any child who is unable to leave a building unassisted under emergency conditions; unable to walk forward or backward unassisted; unable to go up or down steps without help; and/or dependent upon mechanical aids such as crutches, walkers, and wheelchairs.

(L) "Nonteaching employee" means a preschool employee whose primary responsibilities are duties other than care, teaching, and supervision of preschool children.

(M) "Nontoilet-trained toddler" means a child who is at least eighteen months of age but less than three years of age, and requires the use of diapers or training pants.

(N) "Parent" means a person or government agency that is or will be responsible for a child's school attendance under section 3321.01 of the Revised Code.

(O) "Policies" mean principles governing the operation of the preschool program. Policies shall be established and adopted by the board of education.

(P) "Porta-crib" means a crib which has an interior dimension smaller than forty-nine and three-fourths inches (plus or minus five-eighths inch) in length and twenty-six and five-eighths inches (plus or minus five-eighths inch) in width. With the mattress support in its lowest position and the crib side in its highest position, the vertical distance from the upper surface of the mattress support to the upper surface of the crib side and/or end panel shall not be less than twenty-two inches.

(Q) "Preschool child" means a child who has not entered kindergarten and is not of compulsory school age.

(R) "Preschool program" means a child day-care program for children who have not entered kindergarten and who are not of compulsory school age.

(S) "Preschool staff member" means a preschool employee whose primary responsibility is care, teaching, or supervision of preschool children.

(T) "Procedures" mean an administrative course of action specified in writing.

(U) "School-age child" means a child who is five years old as of September thirtieth and enrolled in kindergarten or age six and of compulsory school age.

(V) "School building" means a building that is owned or leased and operated by the district or eligible nonpublic school and has been approved by a municipal, township, or county building department for the purpose of operating a program for preschool children.

(W) "School district" means any city, county, exempted village, local, joint vocational and/or nonpublic school chartered by the state board of education.

(X) "Space" means an area defined by continuous barriers that are at least thirty-six inches in height. The barriers may be permanent or nonpermanent walls, bookcases, partitions or some familiar device used to define the area.

(Y) "Supervision" means the process of overseeing the daily operation of the preschool program.

(Z) "Superintendent" means chief administrative officer of a school district or the chief administrative officer of a nonpublic school.

(AA) "Teacher" means a person hired to instruct a class of preschool children enrolled in the program.

(BB) "Toddler" means a child who is at least eighteen months of age but less than three years of age.

(CC) "Toilet-trained toddler" means a child who is at least eighteen months of age but less than three years of age and does not require the use of diapers or training pants.

3301-37-02 Program.

(A)

A written philosophy and goals shall give direction to the program and shall provide a basis for daily operation that shall effectively promote the needs, interests, and abilities of each child through quiet and active play.

(B) A plan shall be adopted which describes the activities, learning environment, and other age-appropriate approaches which meet the developmental needs of the child.

(C) The program shall have on file and provide to each parent a written plan that will encourage parental participation and keep parents informed about the program and its services. The written plan shall include information to advise parents how to obtain copies of inspection reports of the program. A conference shall be held at least twice a year.

(D) The program shall include a balance of both quiet and active play throughout the day which shall meet intellectual, physical, social, and emotional needs of each child. The quiet and active play shall be reflected in the written program and upon actual observation of the program.

(E) A full-day program serving preschool children shall have a nap period reflected in the daily written program.

(F) A copy of the program schedule for each age group shall be made available for evaluation to the department.

(G) Child progress shall be reviewed according to the program philosophy and goals. Reports of progress shall be made to parent(s) at established intervals. All reporting shall be according to established procedures of the board of education.

3301-37-03 Staff.

(A) The director and staff shall be recruited, employed, assigned, evaluated, and provided in-service education in accordance with adopted board policies and without discrimination on the basis of age, color, national origin, race, sex, or handicap.

(B) The director and staff shall be assigned responsibilities in accordance with written position descriptions commensurate with their certification and qualifications, respectively. The director and/or head teacher shall be onsite at the preschool program at least half of the program's operating hours.

(C) The director shall hold either a valid prekindergarten teaching certificate issued under section 3301.50 of the Revised Code, a valid kindergarten-primary certificate issued under sections 3319.22 to 3319.29 of the Revised Code, or a valid elementary principal's certificate issued under sections 3319.22 to 3319.29 of the Revised Code and have completed at least four course in child development or early childhood education from an accredited college, university, or technical college. A director employed to direct a program operated by an eligible, nontax-supported, nonpublic school shall be considered to meet the requirements of this rule if he holds a valid teaching certificate issued in accordance with section 3301.071 of the Revised Code.

(D) The preschool staff member assigned in each preschool class shall be of good character, possess adequate physical and emotional health, be equipped by education, training, and/or experience for the work they are to perform, and meet the requirements as prescribed in division (B) of section 3301.54 of the Revised Code.

(E) Each class/group in a preschool program on or after July 1, 1993 shall have assigned a head teacher or teacher and that head teacher or teacher shall have one of the following:

(1) Valid prekindergarten teaching certificate issued under section 3301.50 of the Revised Code;

(2) Valid prekindergarten associate certificate issued under section 3301.51 of the Revised Code;

(3) Valid kindergarten-primary certificate issued under sections 3319.22 to 3319.29 of the Revised Code and have completed at least four courses in child development in early childhood education from an accredited college, university, or technical college;

(4) A bachelor's degree in child development or early childhood education earned from an accredited college or university with a minimum of thirty quarter or twenty semester hours in child development/preschool program planning and methods including a supervised practicum with preschool children; or

(5) If the person is employed as a head teacher or teacher in a preschool program operated by an eligible nontax-supported, nonpublic school, he shall be considered to meet the requirements of this rule if he holds a valid teaching certificate issued in accordance with section 3301.071 of the Revised Code.

(F) A preschool staff member shall annually complete fifteen hours of in-service training in child development or early childhood education; child abuse recognition and prevention; first aid; and/or in prevention, recognition, and management of communicable diseases, until a total of forty-five hours has been completed, unless he holds an associate or higher degree in child development or early childhood education from a accredited college, university, or technical college, a prekindergarten associate certificate issued by the state board of education, or a prekindergarten teaching certificate.

(G) The training specified in this rule shall be provided by an approved leader who shall have at least two years of experience specific to the subject area and possess one of the following:

(1) An associate or higher degree in child development or early childhood education, education, home economics, nursing, nutrition, psychology, dental hygiene, or social work. Evidence of an associate or higher degree shall be a copy of a diploma, a transcript, or other written evidence accepted by the director as evidence of completion of at least ninety quarter credit hours or sixty semester credit hours from an accredited college, university, or technical college. The course work shall include at least thirty-six quarter credit hours or twenty-four semester credit hours in courses in any of the subject areas listed in paragraph (F) of this rule;

(2) A prekindergarten certificate issued by the state board of education: or

(3) A license as a physician or registered nurse.

(H) Preschool staff members who have met the requirements as stated in paragraph (F) of this rule shall be required to complete at a minimum four-tenths of one continuing education unit of training in child care, child development, early childhood education, or other child-care related subjects per employment year. The training shall be provided in accordance with rule 3301-22-01 of the Administrative Code.

(I) A director and preschool staff member must not have pleaded guilty or have been convicted of any offense mentioned in division (C) of section 3301.54 of the Revised Code and shall sign and provide a statement attesting to such as required by division (C) of section 3301.54 of the Revised Code.

(J) Each director and preschool staff member shall be examined by a licensed physician not more than thirty days before employment. An employee medical statement shall be on file and be available for review by the department. A director or preschool staff member hired before July 1, 1988 shall be examined by a licensed physician not more than twelve months before the first day of school.

(K) The preschool staff member/child ratio must be maintained at all times. Sufficient preschool staff members must by physically present with the children at all times to meet staff member/child ratio requirements. Each class/group, on or after July 1, 1993, shall have at least one head teacher or teacher as defined in paragraph (E) of this rule. No child shall ever be left alone or unsupervised. In each program the maximum number of children per preschool staff member and the maximum group size by age category of children shall be as follows:

Age Group	Staff Member/Child Ratio	Maximum Group Size
Birth to less than 12 months	1:5, or 2:12 if two preschool staff members are in the room	12
12 months to less than 18 months	1:6	12
18 months to less than 30 months	1:7	14
30 months to less than three years	1:8	16
3 year olds	1:12	24
4 and 5 year olds not in school	1:14	28

(L) At least two responsible adults shall be readily available at all times when seven or more children are present in the program. One adult shall be a preschool staff member. The second adult shall:

(1) Be available within the building used for the preschool program or in an adjacent outdoor area;

(2) Be able to be summoned by the preschool staff member without leaving the group alone or unsupervised; and

(3) Be able to react in response to such summons so as to reduce risk to children during an emergency circumstance.

(M) When age groups are combined, the maximum number of children per preschool staff member shall be determined by the age of the youngest child in the group, except that when no more than one child, thirty months of age or older, receives care in a group in which all the other children are in the next older age group, the maximum number of children per preschool staff member and maximum group size requirements of the older age group established in paragraph (K) of this rule shall apply.

(N) In a room where children are napping, if all children are at least eighteen months of age, the maximum number of children per preschool staff member shall, for a period not to exceed one and one-half hours in any twenty-four-hour day, be twice the maximum number of children per preschool staff member established in paragraph (K) of this rule if all the following criteria are met:

(1) At least one preschool staff member shall be physically present in the room at all times during nap time. The preschool staff member(s) assigned to a room where children are napping shall be responsible for the care and supervision of the children in the room and shall be able to summon other child-care staff members without leaving the room;

(2) There shall be enough preschool staff members readily accessible within the building in which the program is located to ensure that the maximum number of children per preschool staff member as required by paragraph (K) of this rule is met at all times; and

(3) Nap-time preparation shall have been completed and all napping children shall be resting or sleeping on cots.

3301-37-04 Policies and Procedures.

(A) The program shall be guided by written policies of the board which are consistent with applicable statutory requirements contained in the Revised Code and rules adopted by the state board of education. Such policies appropriate for children enrolled in the program shall include, but not be limited to:

(1) Staff;

(2) Cumulative records;

(3) Developmentally-appropriate program planning;

(4) Health and safety;

(5) Developmentally-appropriate materials and equipment;

(6) Admission;

(7) Attendance and discipline;

(8) Selection and use of developmentally-appropriate materials, equipment, and resources that meet the intellectual, physical, social, and emotional needs of the preschool child;

(9) Management of communicable diseases; and

(10) Transportation and field trips.

(B) Each school district or eligible nonpublic school that operates a program shall assign responsibilities for the following:

(1) Ensuring that the health and safety of the children are safeguarded by an organized program of school health services designed to identify child health problems and to coordinate school and community health resources for children, as evidenced by but not limited to:

(a) Requiring immunization and compliance with emergency medical authorization requirements in accordance with rules adopted by the state board of education under section 3301.53 of the Revised Code;
(b) Providing procedures for emergency situations, including fire drills, rapid dismissals, and tornado drills in accordance with section 3737.73 of the Revised Code, and keeping records of such drills or dismissals;
(c) Posting medical and dental emergency procedures in each preschool room and by each telephone and making such available to school personnel, children, and parents;
(d) Posting emergency numbers by each telephone;
(e) Supervising grounds, play areas, and other facilities when scheduled for use by children; and
(f) Providing first-aid facilities and materials.

(2) Supervising each child's admission, placement, and withdrawal according to established procedures.

(3) Preparing at least once annually for each group of children in the program a roster of the name and telephone number of the child and the child's parent and, on request, furnishing the roster for each parent.
(a) Preparing a similar roster of all children in the program and, on request, make it available to each parent with a child in the program.
(b) Securing from each parent a signed statement indicating whether such individual desires to be included in rosters prepared in accordance with this paragraph.
(c) Ensuring that a roster is not furnished to any person other than a parent.

(C) Prior to the administration of a medication, food supplement, modified diet, or fluoride supplement, the program shall:

 (1) Secure the written instructions of a licensed physician or licensed dentist as appropriate for the administration of any medication, food supplement, modified diet, or fluoride supplement; and

 (2) Secure the written, signed, and dated instructions of the parent or guardian on the form provided by the director for the administration of the medication, food supplement, modified diet, or fluoride supplement.

(D) Each time medication is administered, a written record or log including dosage, date, and time shall be made. That record or log shall be kept on file for one year.

(E) Any parent of a child enrolled in the program shall be permitted unlimited access to the school during its hours of operation to contact his child, evaluate the care provided by the program, the premises, or for other purposes approved by the director. Upon entering the premises, the parent shall report to the school office.

(F) In each building in which a program is operated there shall be readily available at all times at least one preschool staff member who has completed a course approved by the State Department of Health or the approved "American Red Cross" training program in:

 (1) First aid; and

 (2) Prevention, recognition, and management of communicable diseases.

(G) In each building in which a program is operated, there shall be readily available at all times at least one preschool staff member who has completed a course approved by the department in child abuse recognition and prevention.

(H) Infants and nonambulatory children eighteen months of age or older shall receive care in rooms on the first story with grade level exits to the outside unless approved by a certified fire safety inspector or state fire marshal. Care on a story other than the first story shall be annually approved by a certified fire safety inspector or state fire marshal. If other than the first story, the annual fire approval form prescribed by the department shall indicate the story approved for care of infants and nonambulatory children eighteen months of age or older.

(I) All preschool staff members shall wash their hands with soap and running water after each diaper change, or after assisting a child with toileting; after cleaning; after toileting; before preparing or eating food; before feeding any child; and when hands have been in contact with nasal or mucous secretions. Disposable towels or an air hand dryer shall be available at all times.

(J) A preschool program serving a handicapped child in a public school shall do so in accordance with Chapter 3301-51 of the Administrative Code concerning education of the handicapped and a preschool program serving a child in an eligible nonpublic school shall do so in accordance with rule 5101:2-12-52 of the Administrative Code concerning care of children with handicapping conditions or health conditions.

(K) The preschool program shall have written permission from the parent or guardian of a child before the child shall be permitted to swim or otherwise participate in water play activities in bodies of water two or more feet in depth. The written permission shall be signed and dated, and shall include the following:

  (1) The child's name;

  (2) A statement indicating whether or not the child is a swimmer, and

  (3) That the parent or guardian grants permission for the child to participate in water activities.

(L) Swimming pools, wading pools, and other bodies of water two or more feet in depth shall be fenced or otherwise made inaccessible to the children when adult supervision is not available.

(M) Preschool staff members shall always accompany and supervise children at swimming sites including, but not limited to public or private swimming pools, lakes, or rivers. Swimming sites removed from the program shall be approved and supervised by local authorities. Activities in bodies of water two or more feet in depth shall be supervised by persons who are currently certified as lifeguards or water safety instructors by the "American Red Cross" or an equivalent water safety program.

(N) The program shall provide enough preschool staff members to meet the requirements of rule 3301-37-03 of the Administrative Code at all times during swimming and water play activities.

3301-37-05 Child Information.

(A) The parent shall provide, prior to the date of admission or not later than thirty days after date of admission, and annually from the date of examination thereafter, a report from a licensed physician affirming that the child is in suitable condition for enrollment in the program. "Prior to the date of admission" means:

  (1) For children younger than three years old at the time of admission, the examination shall occur within six months prior to the date of admission; or

  (2) For children three years old or older at the time of admission, the examination shall occur within twelve months prior to the date of admission.

(B) The cumulative record of each child shall include but not be limited to:

  (1) Name and date of birth;

  (2) Name, address (home and/or business), and telephone number of parent(s);

  (3) Names, addresses, and telephone numbers of two persons to contact in an emergency if the parent cannot be located;

  (4) Name of person(s) to whom the child can be released; and

  (5) Parent authorization for transportation related to the program.

(C) The health record of each child shall include but not be limited to:

  (1) A statement signed by a licensed physician as required by paragraph (A) of this rule;

  (2) Physician's and dentist's authorizations and written instructions to administer prescription medication to a child enrolled in the program;

(3) Immunization record as required by section 3313.67 of the Revised Code, which record shall include immunization required by section 3313.671 of the Revised Code;

(4) A list of any allergies and treatment for said allergies;

(5) A list of any medications, food supplements, modified diets, or fluoride supplements currently being administered to the child;

(6) A list of any chronic physical problems and any history of hospitalization;

(7) A list of any disease the child has had;

(8) Names, addresses, and telephone numbers of physician and dentist in case of emergency;

(9) Permission of parent for emergency medical and dental care as required by section 3313.712 of the Revised Code; and

(10) Permission of parent for emergency transportation.

(D) The program shall maintain daily attendance records including admission and withdrawal.

(E) The program shall secure and have on file all required information no later than the first day of attendance unless otherwise required.

3301-37-06 Facility.

(A) The program shall be located in a safe and convenient facility that accommodates the enrollment, supports child growth and development according to program objectives, and meets the requirements of section 3301.55 of the Revised Code. The facility shall be for the exclusive use of the children enrolled in the preschool program when that program is in session.

(B) The facility shall include not less than thirty-five square feet of usable, wall-to-wall, indoor floor space for each child. Such floor space shall not include hallways, kitchens, storage areas, or any other areas not available for the care of children. Bathrooms shall be included only if they are used exclusively by children enrolled in the program.

(C) Safe play space, including both indoor and outdoor play space, totaling not less than sixty square feet for each child using the space at any one time, shall be regularly available and scheduled for use.

(1) The surface of the outdoor play space shall be well drained.

(2) The play space shall be free of hazards.

(D) Programs serving infants shall have designated space apart from sleeping quarters so that each infant is allowed to sit, crawl, toddle or walk, and play safely and comfortably according to his stage of development.

(E) Infants, nontoilet-trained toddlers, and children enrolled who are permanently assigned to a group of infants or nontoilet-trained toddlers shall receive care in a space or spaces apart from all spaces used to care for toilet-trained toddlers and/or children enrolled in the programs.

(F) When children in diapers use space also used by other children, the space shall be for the exclusive use of said children in diapers while they are within the space.

(G) When nontoilet-trained children are enrolled, there shall be handwashing facilities available within the space or spaces where the nontoilet-trained children receive care.

(H) Handwashing facilities that are located elsewhere may be used when the following requirements are met:

(1) For the purposes of diaper changing, no more than one infant per preschool staff member shall be removed at any time from the space or spaces where the nontoilet-trained children receive care; and

(2) The staff member/child ratio requirements of paragraph (K) of rule 3301-37-03 of the Administrative Code shall be maintained at all times within the space or spaces where the nontoilet-trained children receive care.

3301-37-07 Equipment and Supplies.

(A) Indoor and outdoor play space shall contain furniture, materials, and equipment of appropriate size and type to meet the intellectual, physical, social, and emotional needs of the preschool children enrolled in the program. Materials and equipment shall be:

(1) Maintained in a safe and sanitary condition; and

(2) Provided in quantities proportionate to the enrollment.

(B) Furniture, materials, and equipment shall meet safety and sanitation guidelines developed by the department. The following requirements shall be met:

(1) Protective mats shall be placed under climbers;

(2) Electrical outlets shall be covered when not in use;

(3) Space heaters shall not be used in any preschool program unless approved in writing by the building and/or fire official having jurisdiction in the area; and

(4) If electrical fans are used, they shall have protective coverings; shall not be easily tipped over; and shall be placed so that they are not hazardous to children.

(C) Play materials to be used in the program shall be arranged so that children may select, remove, and replace play materials with a minimum of assistance.

(D) First-aid supplies shall be readily available at all times the program is in operation.

(E) One cot shall be available for each child who remains more than five consecutive hours in the program. Each cot, with individual bedding, shall be labeled in some manner as to who is assigned to use the cot and shall be for the exclusive use of each child between sanitation procedures. Cots shall be thoroughly cleaned with an appropriate germicidal detergent and regularly sanitized before assignment for use by another child.

(F) Each infant shall be provided with a separate crib.

(1) There shall be one crib available which meets the requirements of this rule for each infant.

(2) Each crib shall be labeled with each infant's name who is assigned to use the crib and shall be for the exclusive use of said child between sanitation procedures. Cribs shall be thoroughly cleaned with an appropriate germicidal detergent and regularly sanitized before assignment for use by another child.

(3) Only children under thirty inches tall shall be assigned to use a porta crib.

(4) Porta cribs with dimensions less than thirty-six inches in length and twenty-four inches in width shall not be used by children enrolled in the program.

(5) Only children under thirty-five inches tall shall be assigned to use a full-sized crib. Children over thirty-five inches tall shall be assigned to use a cot.

(G) Each crib shall be of sturdy construction, with closely spaced bars not exceeding two and three-eighths inches. Stacked cribs, mesh cribs, playpens, and bassinets shall be prohibited.

(H) Each crib shall have a firm mattress with a minimum thickness of one and one-half inches.

(I) Each mattress shall be securely covered with a waterproof material which is not dangerous to children.

(J) Each mattress shall have a clean bottom crib sheet and top sheet and/or blanket which is changed at least weekly or more often as necessary. The sheets and blankets shall be changed whenever another child uses the crib.

(K) Cribs shall be spaced apart from each other by a minimum of two feet on all sides.

(L) The space between the mattress and the side of the crib or the end panels of the crib shall not exceed one and one-half inches.

(M) Potty chairs in the program shall not be located in areas used for food preparation or serving or in areas not normally used for diaper changing or toileting. Potties shall be emptied, cleaned, disinfected, and rinsed with water after each use. The rinsing solution shall be disposed of into a toilet, not a sink. Disposable cloths used for cleaning potties shall be used once and disposed of in a plastic-lined covered receptacle. Reusable cloths shall be stored in an appropriate germicidal solution and held for laundering for no longer than one day.

3301-37-08 Procedures for Evaluation.

(A) The superintendent or designee shall monitor monthly the following: administration of the program, facilities, funding, recordkeeping, and compliance with this chapter. Areas of noncompliance shall be corrected immediately.

(B) Information from monthly evaluations shall be aggregated and submitted to the department in an annual report.

(C) Each superintendent or designee shall receive training provided by the department in evaluating programs.

(D) The program shall be evaluated by the Department of Education to determine if such program is in compliance with Chapter 3301-37 of the Administrative Code. Such evaluation shall take place at least once every five years.

  (1) The superintendent shall be informed of evaluation dates and procedures.

  (2) A written report of the results of the program evaluation shall be mailed to the superintendent, the director, and the president of the board of education. The evaluation report shall specify any deficiencies and dates by which corrections will be required. The director shall notify parents and other interested parties of a public meeting to be held within thirty days of receipt of the evaluation report. The purpose of the meeting would be to discuss the results of the program evaluation. However, a public meeting held by an eligible nonpublic school may be limited to preschool staff members and parents, guardians, and custodians of the children.

  (3) A plan to correct deficiencies shall be prepared and submitted to the department.

  (4) Onsite verification may be conducted to review progress regarding the correction of deficiencies.

(5) An extension of the timeline or alternate means for correction of deficiencies may be approved by the department.

(6) The department shall make public notice of any deficiences which have not been corrected by the times specified in the evaluation report. Failure to comply with the rules in this chapter may be cause for initiating proceedings for withholding of funds.

(E) All complaints and reports concerning the operation of programs regulated by Chapter 3301-37 of the Administrative Code may be reported to the designated department ombudsman. The name and phone number of the designated department ombudsman shall be posted in a visible place.

(F) Records and reports related to the program shall be submitted as requested by the department.

3301-37-09 School Food Services.

(A) The program shall be in compliance with sections 3313.81 and 3313.813 of the Revised Code.

(B) The program shall provide meals and snacks of quantity and quality to supplement food served at home so that the daily nutritional needs of the child are met in accordance with required daily allowance as prescribed by the U.S. Department of Agriculture meal patterns:

(1) A food source of Vitamin C shall be served daily and a food source of Vitamin A shall be served three times per week either with the meal or snack required by this rule; and

(2) Fluid milk shall be Vitamin D fortified. Low-fat, skim, or dry powdered skim milk shall be Vitamin A and Vitamin D fortified. Reconstituted dry powdered milk shall be used only for cooking and shall not be used as a beverage.

(C) Lunch shall be served to a preschool child who is in attendance entirely through the hours of eleven a.m. and one-thirty p.m., inclusively.

(D) The snack shall be served during the longest period between meals. A choice from two of the groups listed below must be served for snack:

(1) Meat/meat-equivalent group;

(2) Bread/bread-alternatives group;

(3) Milk group; or

(4) Fruit/vegetable group.

(E) Current menus for the entire week shall be posted in a conspicuous place and shall reflect all meals and snacks to be served by the program. Any substitute foods served shall be from the same basic food group and shall be recorded on the posted menu on the day the substitute food is served.

(F) Infant food and/or formula provided by the parent shall be labeled with the child's name, date of preparation, and immediately refrigerated, except for unopened commercially prepared canned food or formula.

(G) Breast milk or formula provided by the parents shall be labeled with the child's name, the date of receipt, and immediately refrigerated. Breast milk or formula shall not be stored for more than twenty-four hours. The unused portion of formula, breast milk, or food remaining in the container from which the infant has been directly fed shall not be reheated or served a second time.

(H) Infant food and formula shall be prepared, stored, and served in a manner appropriate to the equipment use and the needs of each individual child according to his stage of development and in conformity with written instruction from the parent or physician in charge of the child.

(I) Formula shall not be heated in a microwave oven.

(J) Food heated in a microwave oven shall be stirred or shaken during heating to avoid uneven heating.

(K) Infants shall be held for all feedings.

(L) Programs that care for infants shall provide commercially prepared formula to be used in the event that the parent does not provide a quantity of formula sufficient to meet the infant's daily requirement.

(M) In addition to the requirements stated in this rule, preschool programs serving infants shall also meet the requirements specified in rules 5101:2-12-70 and 5101:2-12-71 of the Administrative Code relating to infant formula and infant foods.

3301-37-10 Diapering.

(A) The changing of diapers for all nontoilet-trained children shall be handled in conformity with the following methods:

    (1) The changing of diapers for all nontoilet-trained children shall occur in a space that contains a handwashing facility;

    (2) If an infant's diapers are to be changed in his crib, there shall be some separation material between the infant and the changing surface. The material shall be discarded and replaced after each change;

    (3) The central diaper-changing station shall be disinfected after each diaper change with an appropriate germicidal agent. If the diaper-changing station is soiled after the diaper change, it shall be cleaned with soap and water and then disinfected with an appropriate germicidal agent;

    (4) Any product used during diaper changing on more than one child shall be used in such a way that the container does not touch the child. Any product obtained from a common container and applied to a child shall be applied in such a manner so as not to contaminate the product or its container. Common containers shall be cleaned and disinfected with an appropriate germicidal agent when soiled; and

    (5) For the purpose of diapering, topical ointments and creams provided by parents shall include written instructions. Such instructions shall include the name of the ointment, cream, or lotion; name of the child; birth date of the child; date; and signature. Written instructions shall be valid for no longer than three months. Authorization for administration of the ointment, cream, or lotion may be cancelled by written request of the parent at any time. When used for skin irritations or manifestations of skin irritations, the ointment, cream, or lotion shall be administered by the center for no longer than fourteen consecutive days at any one time.

(B) Storing of clean diapers shall be handled in accordance with the following methods:

(1) A clean supply of diapers stored in a specifically designated area shall be available at all times; and

(2) Diapers or clothing used during diaper changing and brought from the child's home shall be stored in space assigned exclusively for each child's belongings.

(C) Storage and laundering of soiled diapers shall be handled in accordance with the following methods:

(1) Diapers or clothing soiled with fecal matter and sent home with a child need not be rinsed at the program facility, but may be placed directly into a plastic container or bag, sealed tightly, stored away from the rest of the child's belongings and out of the reach of children;

(2) Soiled diapers to be disposed of or cleaned by the program shall be placed in a common plastic-lined covered container which shall be emptied, cleaned, and disinfected with an appropriate germicidal agent daily or more frequently as needed. Diapers to be laundered at the program facility should be stored in an appropriate germicidal solution until laundered;

(3) Soiled diapers to be commercially laundered shall be held for pickup for laundering for no longer than seven days;

(4) Diapers to be laundered at home or by the program shall be held for laundering for no longer than one day; and

(5) Soiled disposable diapers shall be discarded daily.

3301-37-11 Management of Communicable Disease.

(A) A person trained to recognize the common signs of communicable disease or other illness shall observe each child daily as he enters a group. A "person trained to recognize the common signs of communicable disease" means any person trained in prevention, recognition, and management of communicable diseases as required by paragraph (F) of rule 3301-37-04 of the Administrative Code.

(B) The following precautions shall be taken for children suspected of having a communicable disease:

(1) The program shall immediately notify the parent or guardian of the child's condition when a child has been observed with signs or symptoms of illness;

(2) A child with any of the following signs or symptoms of illness shall be immediately isolated and discharged to his parent or guardian:

(a) Diarrhea (more than one abnormally loose stool within a twenty-four hour period);
(b) Severe coughing, causing the child to become red or blue in the face or to make a whooping sound;
(c) Difficult or rapid breathing;
(d) Yellowish skin or eyes;
(e) Conjunctivitis;
(f) Temperature of one hundred degrees Fahrenheit taken by the axillary method when in combination with other signs of illness;
(g) Untreated infected skin patch(es);
(h) Unusually dark urine and/or grey or white stool; or
(i) Stiff neck.

(3) A child with any of the following signs or symptoms of illness shall be immediately isolated from other children. Decisions regarding whether the child should be discharged immediately or at some other time during the day shall be determined by the director and the parent or guardian. The child, while isolated at the program, shall be carefully watched for symptoms listed in paragraph (B)(2) of this rule as well as the following:

  (a) Unusual spots or rashes;
  (b) Sore throat or difficulty in swallowing;
  (c) Elevated temperature;
  (d) Vomiting; or
  (e) Evidence of lice, scabies, or other parasitic infestation.

(4) Programs shall follow the Ohio Department of Health "Child Day Care Communicable Disease Chart" for appropriate management of suspected illnesses;

(5) A child isolated due to suspected communicable disease shall be:

  (a) Cared for in a room or portion of a room not being used in the preschool program;
  (b) Within sight and hearing of an adult at all times. No child shall ever be left alone or unsupervised;
  (c) Made comfortable and provided with a cot. All linens and blankets used by the ill child shall be laundered before being used by another child. After use, the cots shall be disinfected with an appropriate germicidal agent, or, if soiled with blood, feces, vomitus, or other body fluids, the cots shall be cleaned with soap and water and then disinfected with an appropriate germicidal agent;
  (d) Observed carefully for worsening condition; and
  (e) Discharged to parent, guardian, or person designated by the parent or guardian as soon as practical.

(C) Each program shall have a written policy concerning the management of communicable disease. The policy shall include, at a minimum:

(1) The program's means of training all preschool staff in signs and symptoms of illness and in handwashing and disinfection procedures;

(2) Procedures for isolating and discharging an ill child and policy for readmitting such child;

(3) Procedures for notifying the parent or guardian immediately when a child is exhibiting signs or symptoms of illness or has been exposed to a communicable disease; and

(4) Procedures regarding the care of a mildly ill child. "Mildly ill child" means a child who is experiencing minor common cold symptoms, but who is not exhibiting any of the symptoms specified in paragraph (B) of this rule or a child who does not feel well enough to participate in activities, but who is not exhibiting any of the symptoms specified in paragraph (B) of this rule.

CLASSROOM AREAS FOR DEVELOPMENTAL SKILL ENHANCEMENT

Learning activities and materials will be concrete, real, and relevant to the lives of young children. Learning will take place as young children touch, manipulate, and experiment with things and interact with people. Pictures and stories will frequently be used to build upon the child's real experiences with things and interaction with people.

Our classrooms consist of various different areas where developmental skills are enhanced.

Reading/Language Arts Area: Children use books, audio tapes, and games to help them understand the relationship between spoken and written language. Most importantly, children will enjoy both forms of language.

Block Area: Block play encourages children to use their imagination, requires cooperation with others, and helps develop eye-hand coordination. Blocks also help develop understanding of shapes, measurement, and balance.

Housekeeping Area: Children use creative thinking, develop skills in communicating and relating to others, using furniture, dress-up clothes, cooking and cleaning tools.

Manipulative Area: Children handle small puzzle pieces, beads, and sewing toys, developing fine motor skills and eye-hand coordination. Children also develop math skills by comparing sizes, colors, and shapes, and by grouping small manipulative items.

Woodworking Area: Children use soft wood, tools, and measuring instruments to develop large and small muscle control, problem solving, creative expression, cooperation, and respect for others.

Science Area: Children use magnets, weighing and measuring instruments, and magnifying glasses, to learn about the world around them. They observe, measure, classify, predict, experiment, and communicate their discoveries. Young children will begin to develop habits of problem solving and investigating — asking "Why?", and then finding out!

Art Area: Children use creativity here. They also develop fine muscle control and eye-hand coordination. They learn about color, line, shape and texture, using paints, crayons, paper, clay, paste, scissors, and markers. They also may feel more comfortable in expressing themselves through painting or drawing than with language.

Water and Sand Area: Children use water, rice, sand, corn meal, corn starch, measuring cups, mixers, sponges, funnels, and objects that sink or float, will learn math and science. They weigh and measure, and learn properties of materials. They use imaginative play and cooperate with others, while using small and large muscles in digging, hauling, pouring, and cleaning up.

Large Muscle Activities: Children will use the courtyard or outdoor area when weather permits, and otherwise the gym area for supervised activity. They will use balance beams, mats, tunnels, balls, and other materials, to develop physical skills such as pulling, pushing, riding, jumping, and running. Play during this time requires cooperation and following teacher direction. Many time numbers/counting and spatial concepts such as over/under, up/down, in/out, etc., are developed.

Huron County Public Schools (1990). *"On the right track" public preschool program.* Norwalk OH: Division of Education.

A-H14

EQUIPMENT AND SUPPLIES LIST

The following is a list of equipment and supplies that could be purchased. These items are classified according to the areas of development specified in the drawings of the room arrangement. The catalog price totals from 1986 for each area is included.

Equipment List ($5,574)
Roto Play Group ($799):
  (indoor large muscle equipment)
One-half unit blocks ($375)
Outdoor playground materials ($4,400)

Supplies List ($7,157)

Painting Area ($320)
Easels
Paint cups
Assorted brushes
Tempera paint
Finger paint
Watercolors

Reading/Listening Area ($900)
Book rack
Books
Pillows
Stuffed animals
Tape recorder
Record player with headphones
Records
Flannel board, easel, stories
Rocking chairs (1 adult, 1 child)

Manipulative Area ($705)
Peg-grading board
Bag of blocks
Bristle blocks
Beads
Magnetic designer
Parquetry blocks and patterns
Jumbo pegs
Easy-grip pegs
Tactilmats
People builder
Slotting shapes
Preschool "Legos"
Chain links
Giant magnet-form box
Frame mosaic and patterns
Lacing shapes
Puzzles
- knobbed puzzles
- early-learner puzzles
- simple 6-piece puzzles
- shape discs
- puzzle forms
- transportation fleet
- alphabet
- numbers
- large-floor puzzles

Clay
Playdough

Woodworking Area ($350)
Bench/vise
Tools
Goggles

Writing, Drawing, Construction Area ($283)
Construction paper
Tissue paper
Rolled paper
Fingerpaint paper
Newsprint
Manila paper
White drawing paper
Oak tag
Scissors
Paste
Glue
Crayons
Markers
Chalk
Yarn
Pencils
Pipe cleaners
Glitter
Tape
Fasteners

Science ($450)
Magnets
Hand magnifiers
Bird feeders and nesting boxes
Bird seed
Gardening tools
Small-pet equipment
Greenhouse (materials only — constructed by district maintenance crew)

Water/Sand Area ($370)

Sand-and-water-play table/top
Geometric sand molds
Sand-mover company
Pails and scoops
Sand sieves and funnels
Sand-castle molds
Alphabet sand molds
Sand
Lakeshore water-play kit
Sailboats
Little fisherman
Balance
Aprons
Measuring devices
Child-size hall tree

Block Area ($560)

Block-storage unit
Storybook city
Storybook farm
Block-play fleet
Transportation fleet
Playmat
Block-play signs
Hospital-play center
Magnetic crane

Large Motor Area (Multipurpose room)($1,164)

Tricycles
Flying turtles
Gym scooters
Wagon and Trailer
Stand-up scooters
Traffic signs
Parachute
Hoops
Bean bags
Rubber balls — 8½"
Nerf balls — 4"
Yarn balls
Turtle bowling set
Play tunnel
Balance beam

Miscellaneous ($1,100)

Camera
Film
Music instruments
Table and chairs
Film processing
Stapler
Staples
Bulletin board materials
Timer
Electric burner

Dramatic Play ($955)

Housekeeping Area
- dishes
- pots and pans
- toaster
- high chair
- cupboard (provided by school)
- sink (provided by school)
- ironing board and iron (provided by school)
- doll carriage (provided by school)
- beds (provided by school)
- rocking chair
- mirror
- play clothes storage unit (provided by school)
- medical kit
- dolls
- house-cleaning set
- phones
- make-believe hats
- cash register
- pretend car
- Indian tepee

Puppets
- animal puppets
- career puppets
- puppet stage

Ohio Department of Education, Division of Early Childhood. *Preschool guidelines, suburban model.* Ontario Local School District.

The above list does not include a computer or any type of adaptive equipment which may be needed in a special class. You may wish to collaborate with a special class resource to search through catalogs for appropriate equipment for use in your district.

A-H15

COMPARING PRESCHOOL SCHOOL-AGE SETTINGS

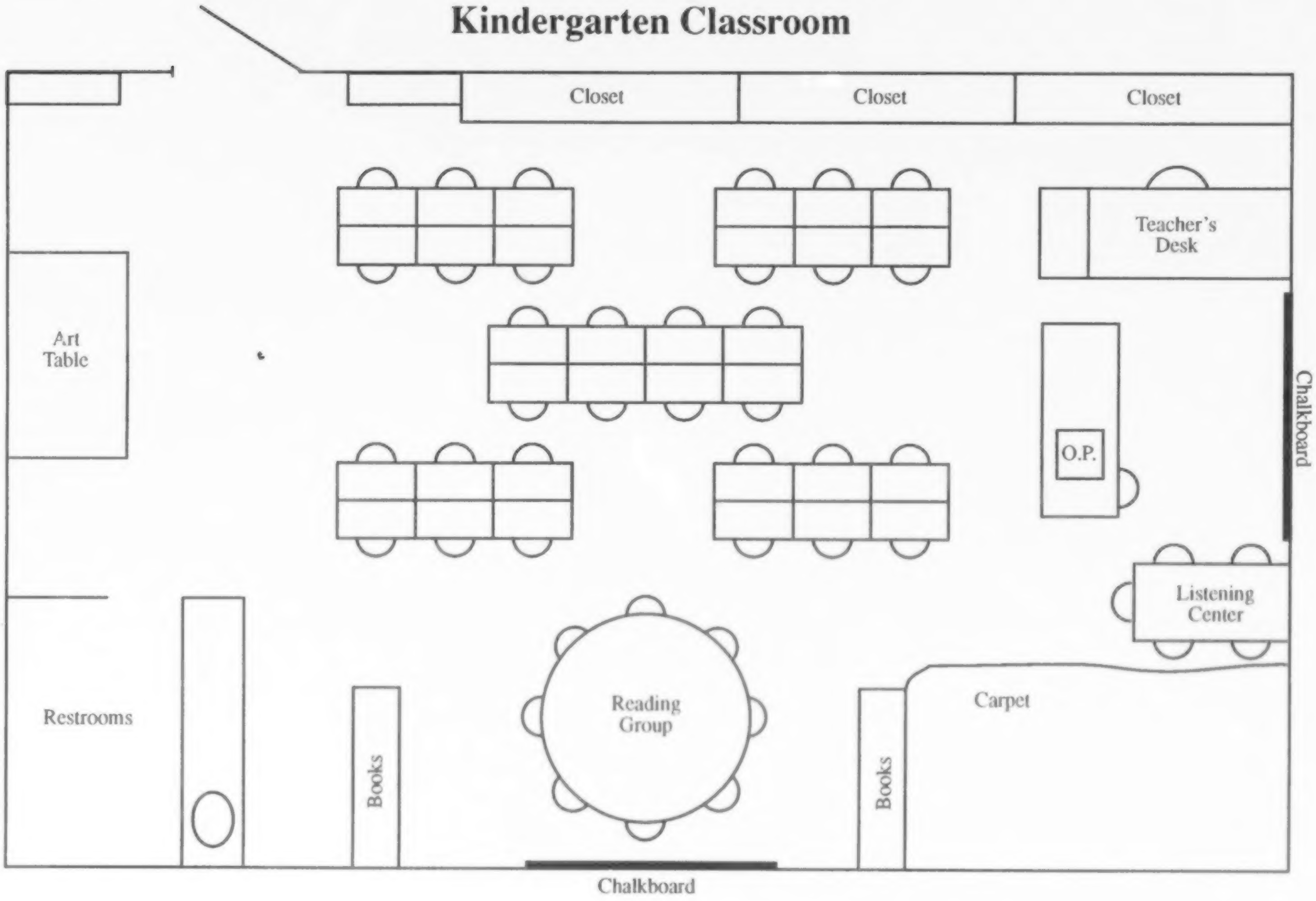
Preschool Setting

1. All chalkboards, water fountains, sinks, toilets, chairs, tables, light switches, and shelves are all at a level that a three year old may reach on their own.
2. The room is decorated with colorful materials and the student's work.
3. The room is set up with a variety of learning centers in the areas of language arts, math and science, art and music, homeliving, woodworking, sand and water, listening and viewing, a creative corner, and a quiet area with a piece of colorful carpet and/or some pillows.
4. There is a separation of noisy centers such as block building and homeliving from quiet areas such as reading and research.
5. There is a variety of equipment, materials, and supplies for children to work with that accommodates different ages, abilities, and interests.
6. Children are free to use the equipment by themselves.
7. Individual and small group activities are encouraged.
8. A great variety of experiences are available in the creative, intellectual, artistic, and physical areas.
9. Many opportunities are provided for learning through the senses — feeling, tasting, hearing, smelling, and seeing.
10. Children understand their responsibilities and they are encouraged to be independent.
11. The teacher is supportive and serves as a guide, facilitator of learning, and resource person rather than as a dispenser of information.

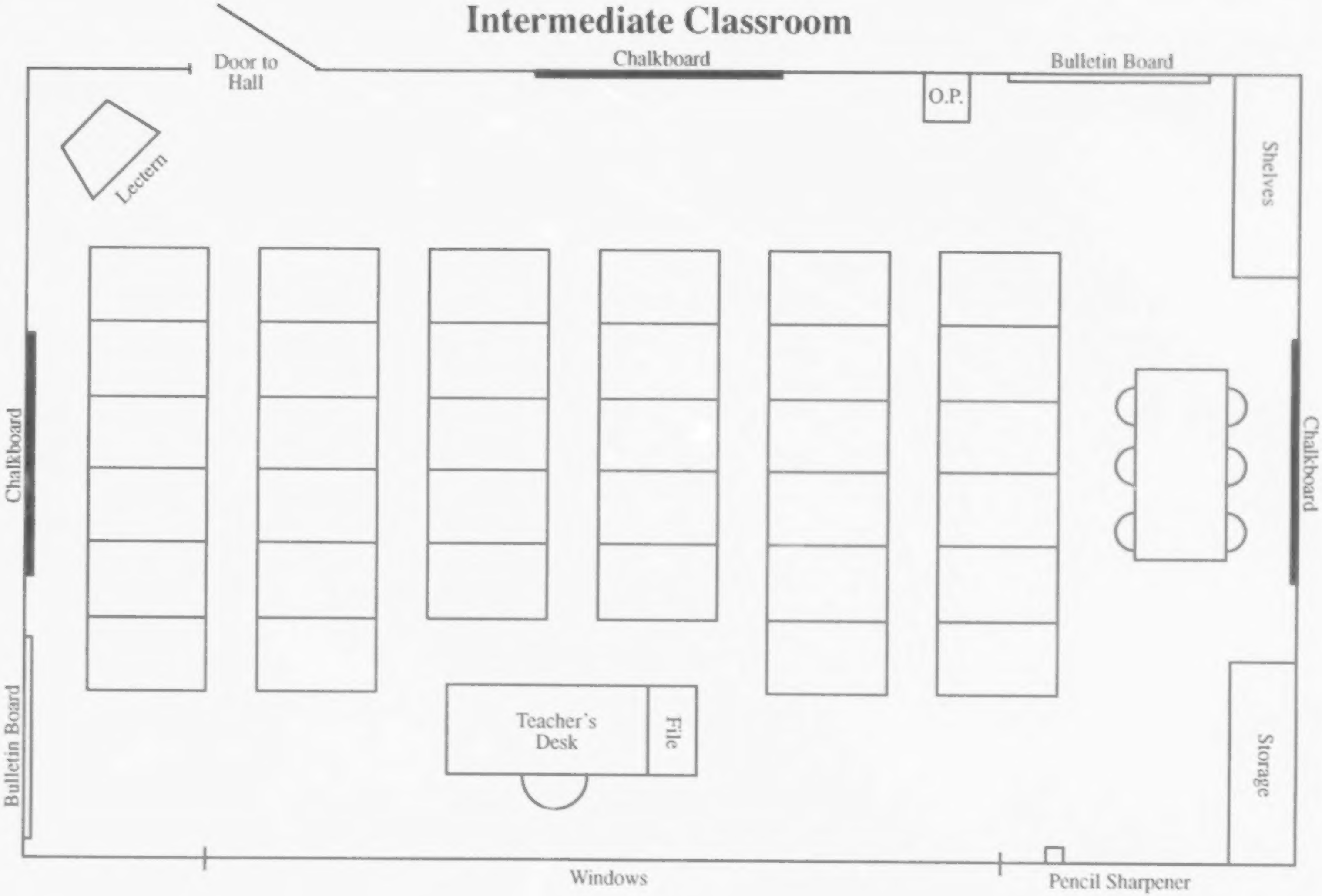
School-Age Setting

1. The kindergarten room is to be similar to the preschool with learning centers, a variety of equipment, supplies, and materials, and individual and small group activities are encouraged.
2. The old buildings in which school-aged programs are placed include water fountains, chalkboards, sinks, toilets, chairs, tables, light switches, and shelves are placed taller for the school-aged student.
3. Many school rooms have chairs set in rows.
4. There are no learning centers or groups.
5. Children are to work independently or occasionally in small groups.
6. There are strict rules for behavior set by the teacher.
7. The children are to sit for long periods of time without speaking or moving from their seat.
8. The teacher is usually doing all the talking in the classroom.
9. The teacher stands in front of the class to speak.
10. Teacher is often sitting at their desk.
11. All children do the same activity at the same time.

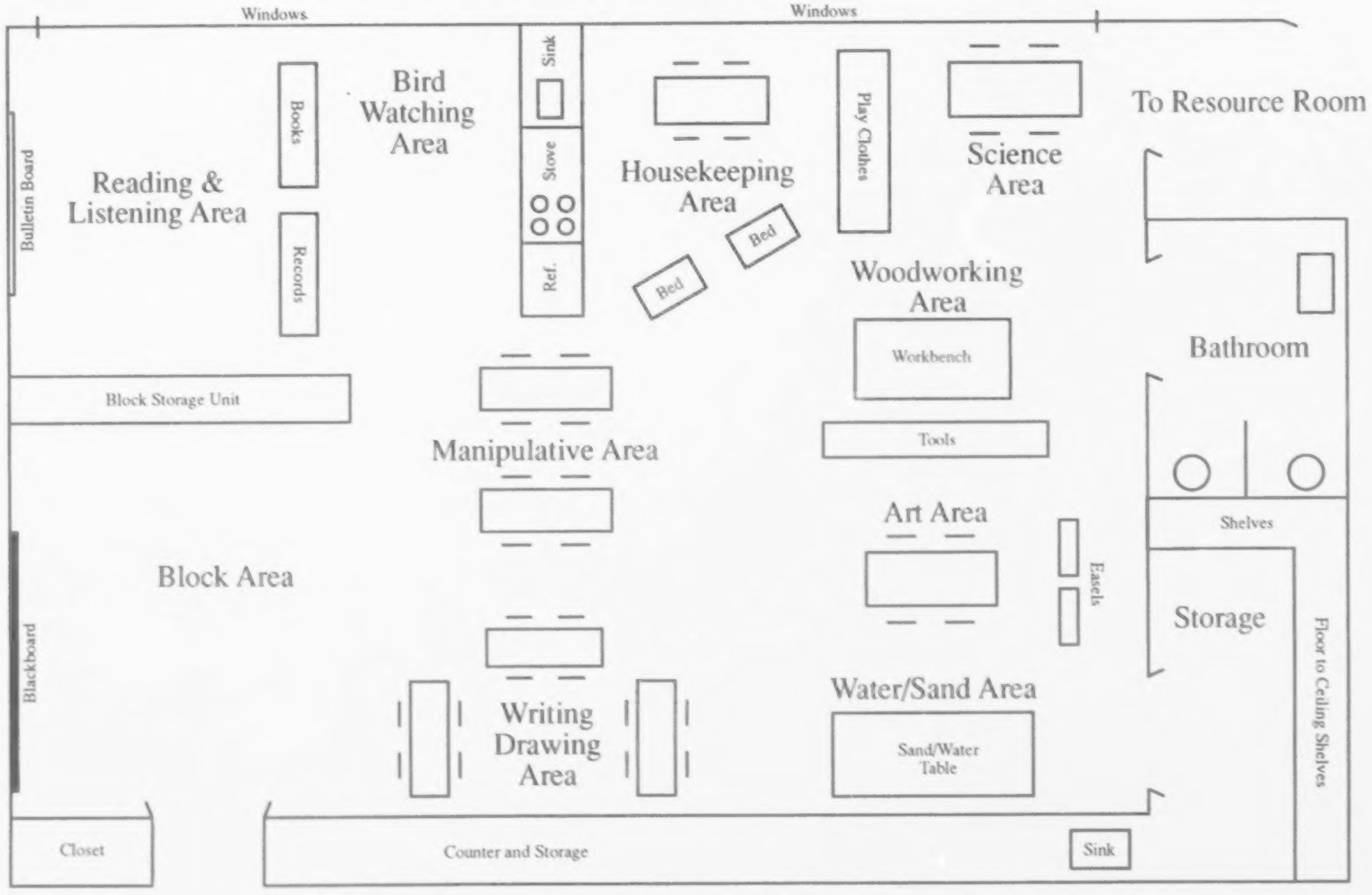
Kindergarten Classroom


Closet
Closet
Closet
Teacher's Desk
Art Table
O.P.
Chalkboard
Listening Center
Reading Group
Carpet
Restrooms
Books
Books
Chalkboard

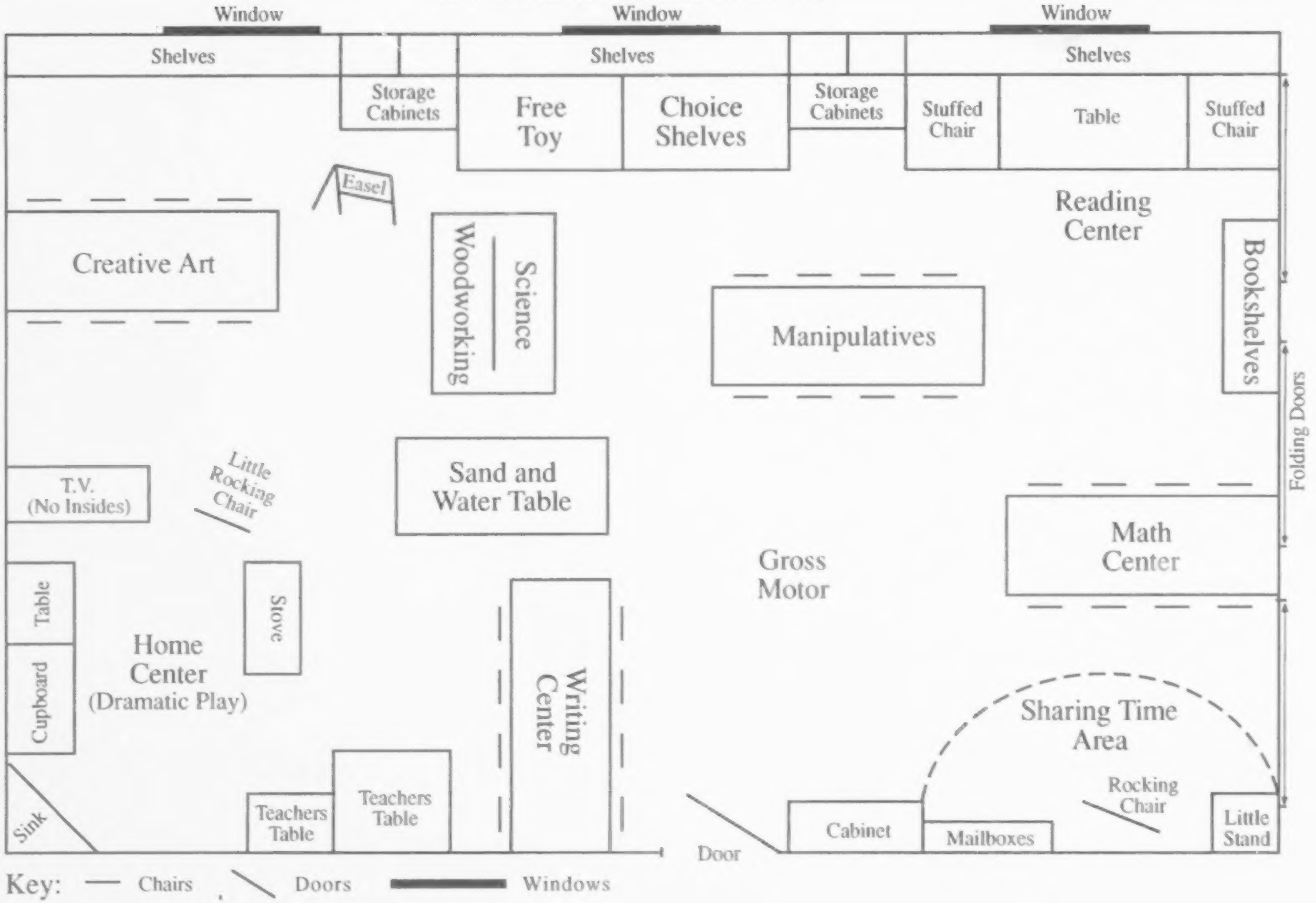
Intermediate Classroom


Door to Hall
Chalkboard
O.P.
Bulletin Board
Lectern
Shelves
Chalkboard
Chalkboard
Teacher's Desk
File
Bulletin Board
Storage
Windows
Pencil Sharpener

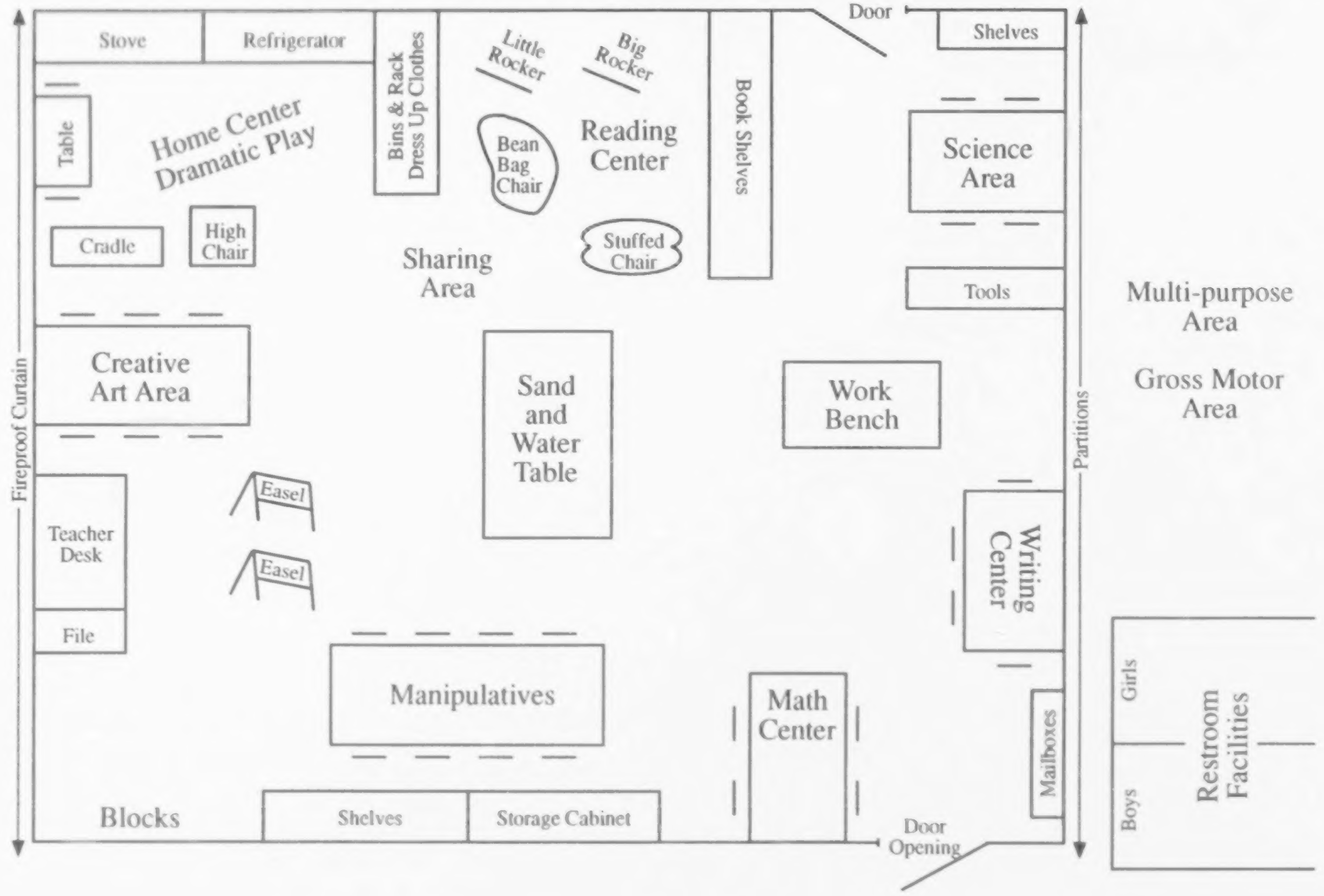
Preschool Classroom #1


Windows
Windows
Bulletin Board
Reading & Listening Area
Books
Records
Bird Watching Area
Sink
Stove
Ref.
Housekeeping Area
Bed
Bed
Play Clothes
Science Area
To Resource Room
Woodworking Area
Workbench
Tools
Bathroom
Block Storage Unit
Manipulative Area
Art Area
Easels
Shelves
Storage
Floor to Ceiling Shelves
Block Area
Blackboard
Writing Drawing Area
Water/Sand Area
Sand/Water Table
Closet
Counter and Storage
Sink

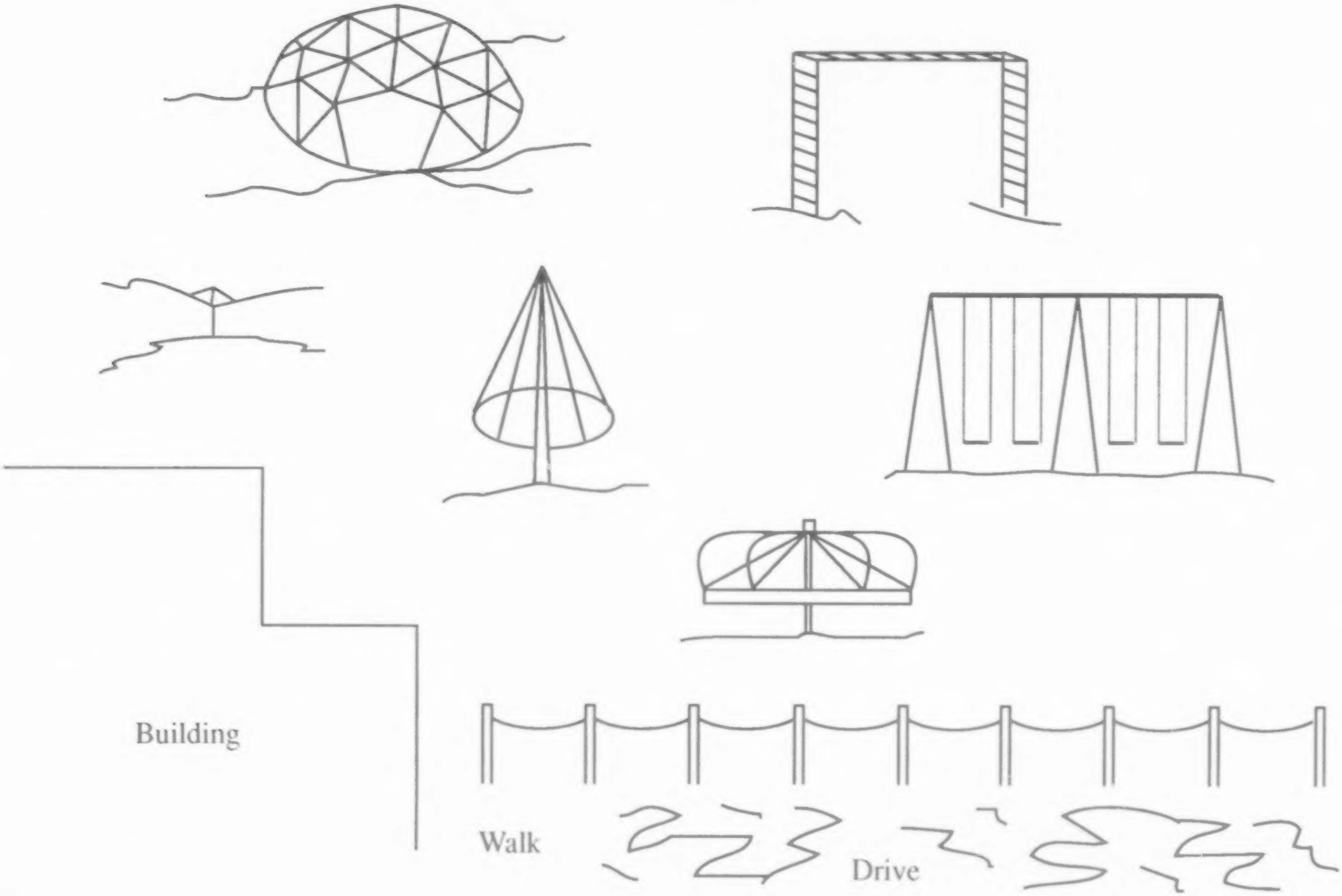
Preschool Classroom #2


Window
Window
Window
Shelves
Shelves
Shelves
Storage Cabinets
Free Toy
Choice Shelves
Storage Cabinets
Stuffed Chair
Table
Stuffed Chair
Easel
Creative Art
Woodworking
Science
Reading Center
Manipulatives
Bookshelves
Folding Doors
Little Rocking Chair
T.V. (No Insides)
Sand and Water Table
Math Center
Gross Motor
Table
Cupboard
Stove
Home Center (Dramatic Play)
Writing Center
Sharing Time Area
Rocking Chair
Sink
Teachers Table
Teachers Table
Door
Cabinet
Mailboxes
Little Stand
Key:
Chairs
Doors
Windows

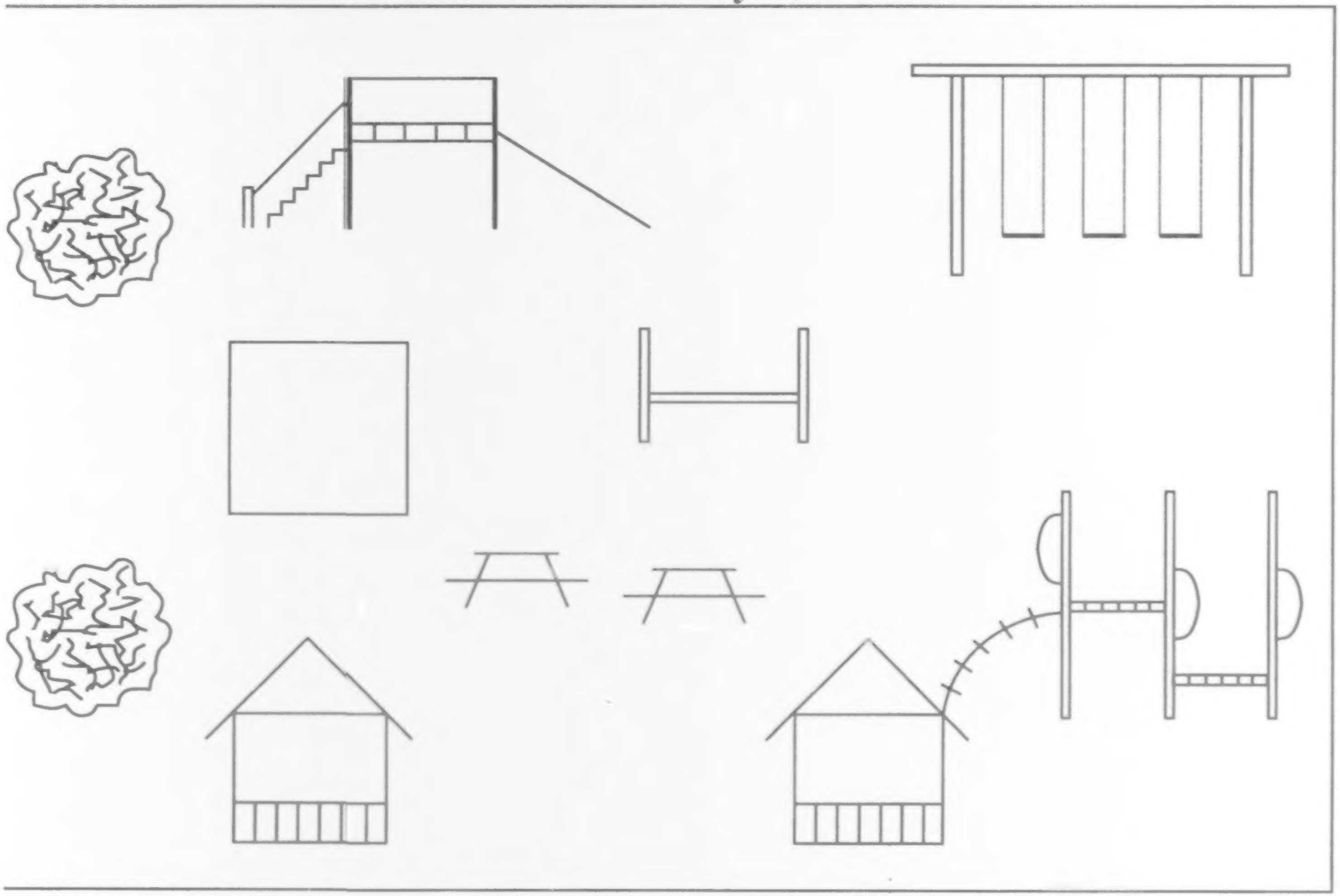
Preschool Classroom at a YMCA #3


Stove
Refrigerator
Bins & Rack Dress Up Clothes
Little Rocker
Big Rocker
Book Shelves
Door
Shelves
Table
Home Center Dramatic Play
Bean Bag Chair
Reading Center
Science Area
Cradle
High Chair
Sharing Area
Stuffed Chair
Tools
Multi-purpose Area
Gross Motor Area
Creative Art Area
Sand and Water Table
Work Bench
Fireproof Curtain
Partitions
Easel
Easel
Teacher Desk
File
Writing Center
Manipulatives
Math Center
Mailboxes
Girls
Boys
Restroom Facilities
Blocks
Shelves
Storage Cabinet
Door Opening

Elementary Playground

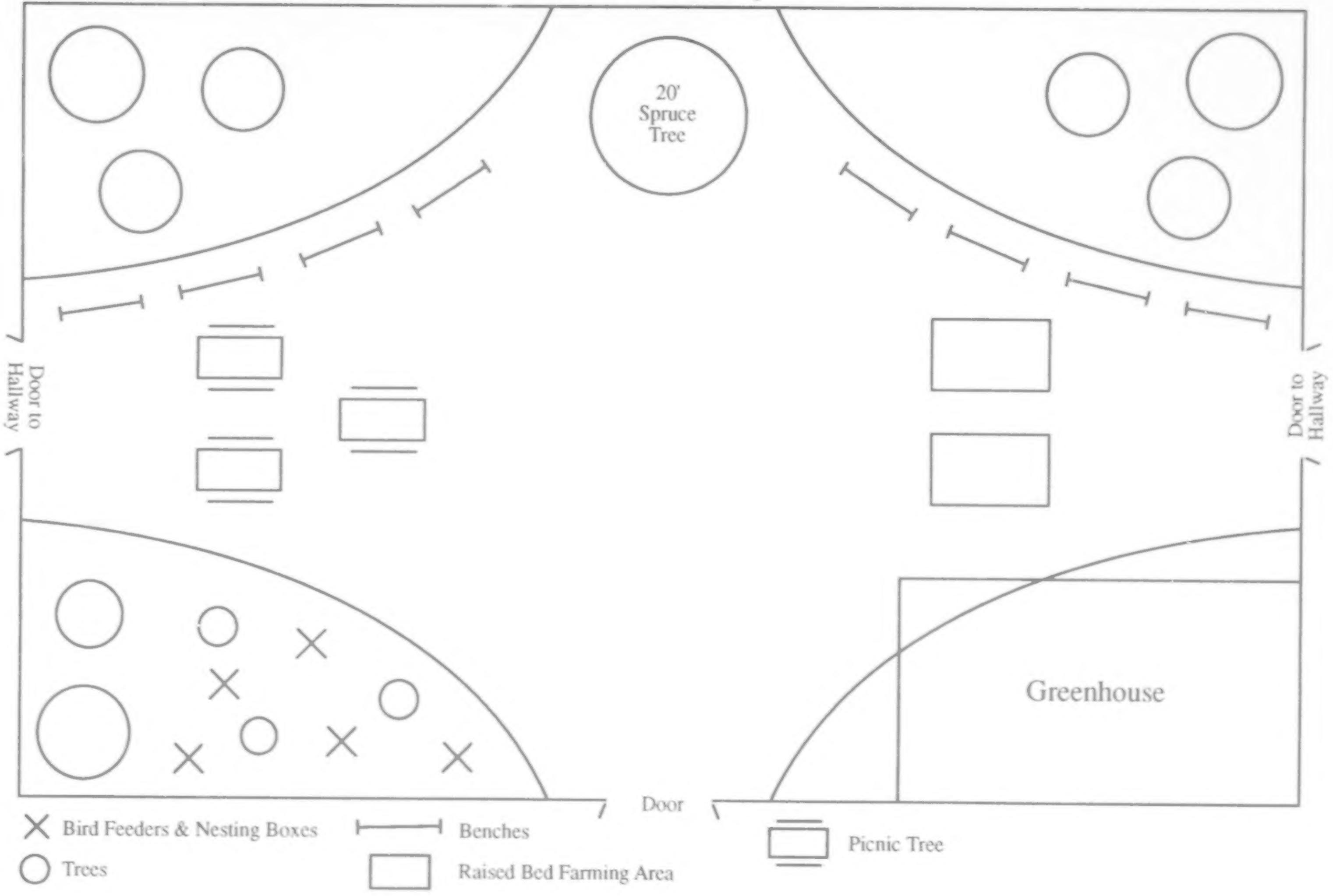

Building
Walk
Drive

Preschool Fenced In Play Area YMCA



40' x 60'

Preschool Courtyard


20' Spruce Tree
Door to Hallway
Door to Hallway
Greenhouse
Door
Bird Feeders & Nesting Boxes
Benches
Picnic Tree
Trees
Raised Bed Farming Area

LEVEL: ADMINISTRATOR

GOAL: #2 Gain competency in the concept of developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

COMPETENCY TYPE: SKILL

OBJECTIVE: Participants will develop a plan for equipping an itinerant teacher or special classroom to provide an appropriate experience for preschoolers with disabilities and those who are typically developing and thus foster development of self-control.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large or small group activity Participants will estimate start-up costs and additional projected costs for district preschool programs.	1. Handout (A-H17) *Estimating the Cost*	1. The Handout has categories to break down the start-up cost of a preschool. The leader may wish to encourage a discussion before distributing the printed copy. The leader may use the Handout as an Transparency to write down participants' estimated costs as a group depending on time and the size of the group. Again, remind participants that a developmentally appropriate environment is needed to foster development of self-control in young children.

A-H17

ESTIMATING THE COST

Using the given materials.and the outlined categories below, estimate the start-up costs and the additional projected costs for district preschool program(s).

Type of children to be served with class size

Type and number of classes to be started

Type of facility to be used and cost

Number of areas for developmental skill enhancement with materials and/or equipment and their projected cost of each

Type of materials the school or district has in stock and amount that can be deducted from projected costs

The amount of money available within the school or district for preschool

The number of years the school wishes to project the cost of running a preschool and the amount divided amongst the years

The number and cost for each staff member employed for preschool

Any additional projected costs to consider and the cost

LEVEL: ADMINISTRATOR

GOAL: #2 Gain competency in the concept of developmentally appropriate factors that need to be present in the preschool environment/s in order to facilitate development of self-control in all children.

COMPETENCY TYPE: VALUE/ATTITUDE

OBJECTIVE: Participants will outline a short presentation that explains why certain environmental conditions are necessary for the preschool program under consideration.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Small group activity Participants will write an outline for a board of education presentation that states the importance of providing an appropriate preschool setting and includes the space needs and costs of equipment and materials.	1. Transparency/Worksheet (A-T3) *Outline for Board of Education*	1. The participants should use all the information sheets to write an outline. Ask participants to address the issue of children's behavior and development of self-control in the presentation. The leader may wish to write down participants suggestion for an outline on the Transparency depending on time.

A-T3

OUTLINE FOR BOARD OF EDUCATION

GOAL 3

Managing Behaviors

BEST COPY AVAILABLE

LEVEL: ADMINISTRATOR

GOAL: #3 Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: KNOWLEDGE

OBJECTIVE: Participants will define developmentally appropriate preventative approaches to managing behavior with preschoolers.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Given a written description of each preventative approach to managing behavior, participants will list why each is developmentally and exceptionality appropriate.	1. Handout (A-H18) *Definition of Preventative Approach to Behavior Management* Handout/Transparency *Social Competence* (A-H19, A-T4) *Enhanced Self-Esteem* (A-H20, A-T5) *Self-Esteem* (A-H21) *Ways to Enhance the Growth of Self-Esteem* (A-H22) *Systematic Interventions* (A-H23, A-T6) *Teach Children Socially Acceptable Ways of Getting What They Want* (A-H24, A-T7) *How to Increase a Child's Ability to Make Friends* (A-H25) *Increase the Child's Ability to Function Successfully as Part of a Group* (A-H26) *Systematic Interventions* (A-T8) *Basic Principles of Effective Management* (A-H27, A-T9) *Communication Skills* (A-H28) Worksheet (A-W8) *Developmentally Appropriate? Exceptionality Appropriate?*	1. Participants need to recognize the strength of the preventative approach. Discussion may help solidify this concept. It is important for participants to recognize the goodness of children and not assume that there is a behavior problem. It is also important to note that there are additional approaches that are preventative in nature. This is not intended to be complete enough to train someone as a specialist. Additional information should be gathered in areas that are not familiar to the participants.

PREVENTATIVE APPROACH TO MANAGING BEHAVIOR

To ensure success in the child's behavior, adults will set the stage for an environment that is child-centered, based on developmentally appropriate activities, expectations, and techniques, and organized to address positive discipline. The development of self-esteem, appropriate interactions with adults and peers, systematic interventions, and communication is essential in a preventative approach.

Positive Discipline: Any adult disciplinary practice that treats children with respect and dignity. It is a child-centered, unselfish approach, focusing on what a child needs and not so much on what an adult wants or needs.

Baltes, P. B. and Brim, O. G. (Eds.) (1982). *Lifespan development and behavior.* "Self-control and continuity from childhood to adolescence." (Vol. 4). New York: Academic Press.

REACTIVE APPROACH TO MANAGING BEHAVIOR

To attempt to manage behaviors after they occur instead of setting the stage for preventative techniques to be in place so that inappropriate behaviors will not occur.

A-H19

SOCIAL COMPETENCE

Some techniques/principles that foster the development of social competence in the 3- through 5-year-old child are included in this Handout.

1. Adults support 3-year-olds' play and developing independence, helping when needed, but allowing them to do what they are capable of doing and what they want to do for themselves.

2. Adults recognize that, although 3-year-olds are usually more cooperative than toddlers and want to please adults, they may revert to toddler behavior (thumb-sucking, crying, hitting, baby talk) when they are feeling shy or upset, especially in new situations. Adults know that 3-year-olds' interest in babies, and especially their own recent infancy, is an opportunity for children to learn about themselves and human development.

3. Adults provide many opportunities for 3's to play by themselves, next to another child (parallel play), or with one or two other children. Adults recognize that 3-year-olds are not comfortable with much group participation. Adults read a story or play music with small groups and allow children to enter and leave the group at will.

4. Adults encourage children to take turns and share but do not always expect children to give up favored items.

5. Adults provide large amounts of uninterrupted time for children to persist at self-chosen tasks and activities and to practice and perfect their newly developed physical skills if they choose.

6. Adults know that preschoolers do not usually understand or remember the rules. Guidance reasons that are specific to a real situation and that are demonstrated repeatedly are more likely to impress young children.

7. Teachers facilitate the development of self-control in children by using positive guidance techniques such as modeling and encouraging expected behaviors, redirecting children to a more acceptable activity, and setting clear limits. Teacher's expectations match and respect children's developing capabilities.

8. Children are provided many opportunities to develop social skills such as cooperating, helping, negotiating, and talking with the person involved to solve interpersonal problems. Teachers facilitate the development of these positive social skills at all times.

9. Adults provide affection and support, comforting children when they cry and reassuring them when fearful. Adults plan experiences to alleviate children's fears.

From: *Developmentally Appropriate Practice in Early Childhood Programs Serving Children From Birth Through Age 8.* NAEYC 1987.

SOCIAL COMPETENCE

Some techniques/principles that foster the development of social competence in the 3- through 5-year-old child.

1. Adults allow children to do what they are capable of doing and what they want to do for themselves.
2. Adults know that 3-year-olds' interest in babies, and especially their own recent infancy, is an opportunity for children to learn about themselves and human development.
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9. Adults provide affection and support, comforting children when they cry and reassuring them when fearful. Adults plan experiences to alleviate children's fears.

A-H20

ENHANCED SELF-ESTEEM

The process of developing an identity and self-image begins at birth. The security a baby feels through closeness and warmth with parents is the beginning of the growth of self-esteem. As a child grows and develops, the child's self-image comes from other people. It depends on feeling loved by parents and other adults in its life. When a child attends school, it is the teacher and other school staff who take the place of the parent for that portion of the day. If the child is to feel competent and develop positive self-esteem, the adults at school must assist the child to like himself and value his accomplishments. Research indicates that the success that children have in school is almost always dependent on high self-esteem and positive self-worth.

ENHANCING SELF-ESTEEM

- Communicate confidence in children — allow them to make mistakes.
- Arrange the environment for variety.
- Show affection.
- Allow children to show feelings.

A-H21

SELF-ESTEEM

Ellie Kahn, a child therapist, lists the following ways to enhance self-esteem based on her work with children and families. The same methods apply to the school setting.

SHOW UNCONDITIONAL LOVE AND ACCEPTANCE

EXPRESS ANGER RESPONSIBLY

MAKE CLEAR REQUESTS

LEARN TO LISTEN

TAKE A CHILD'S FEELINGS SERIOUSLY

VALIDATE THE CHILD'S EXISTENCE

FIND SOMETHING TO APPRECIATE DAILY

SPEND TIME ALONE WITH A CHILD

ALLOW CHILDREN TO DO THINGS INDEPENDENTLY

RESPECT THE CHILD'S POSSESSIONS

ACKNOWLEDGE THE CHILD'S ABILITIES

RESPECT A CHILD'S CHOICES

TEACH CHILDREN THAT THEY ARE NOT ONLY THEIR BODY

EXPRESS LOVE NONVERBALLY

SPEAK TO A CHILD AT EYE LEVEL

AVOID MIXED MESSAGES

SHARE FEELINGS WITH A CHILD

FOCUS ON EACH CHILD'S UNIQUENESS

From: Kahn, E. (1990). "Strong Feelings of Self-Esteem Fuel a Child's Ability to Learn, to Love, and to Create." *Parents*. pp. 96-100.

WAYS TO ENHANCE THE GROWTH OF SELF-ESTEEM

1. Base expectations on appropriate child development theory.
2. Communicate confidence in children by believing in them; say something encouraging or complimentary each day.
3. Allow children to make mistakes and tolerate their less than perfect efforts at new tasks or challenges.
4. Arrange the environment for children to be involved in a variety of activities and roles.
5. Reward behaviors that are to be continued; find positives in children's behavior to emphasize even when a behavior or task has not been totally successful.
6. Ignore errors that are minor or those which will change with developmental growth and experience.
7. Show affection through physical contact or closeness; tell children in words that you like them.
8. Praise in public, but reprimand in private.
9. Learn how to let every child feel special.
10. Allow children to have plateaus, set-backs, or regressions.
11. Gradually introduce children to new experiences to help prevent fears of failure.
12. Don't feel compelled to lecture or teach lessons at every opportunity.
13. Acknowledge what children are feeling; do not judge, blame, or criticize children for their feelings.
14. Avoid mixed messages.
15. Be honest when communicating.
16. Use "I" messages rather than "you" messages.
17. Be a good listener.
18. Do not make children feel small, unworthy, or inadequate.
19. Help children solve problems by themselves.
20. Treat each child fairly.
21. Avoid power struggles.
22. Model positive self-esteem.

A-H23

SYSTEMATIC INTERVENTIONS

Some systematic intervention techniques/principles that foster the development of self-control in children aged three through five are included on this handout.

HELP CHILDREN LEARN TO RESTRAIN UNSOCIAL IMPULSES

- Short term methods of controlling behavior:
    1. Redirect the child to more positive behavior; remind the child of more positive behavior and the consequences for violating it.
    2. Remove the child from the activity calmly and promptly.
    3. Briefly discuss the child's feelings and the rules at that moment and at greater length at another time.
    4. Allow the child to determine when he is ready to return to the activity.
    5. Help the child return and be more successful in an acceptable way.
    6. When all else fails, take firmer action such as no chance to return to the activity involved or separation from another child.
    7. Comment favorably on regained self-control as soon as possible.
- Long term method for building inner controls:
    1. Analyze the reasons for repeated misbehavior and correct or prevent such conditions when possible.
    2. When such situations happen again and again, change the situation rather than nag the child.
    3. Take individual needs into account.
    4. Realize that children misbehave sometimes because of problems or crisis at home.
    5. Warn ahead.
    6. Tell children what they should do; that is, provide positive instructions instead of negative or neutral ones.
    7. Be alert to potential difficulties and step in before a problem occurs.
    8. Make a point of recognizing good behavior and commending it from time to time — catch the child being good.
    9. Convey a sense of warmth along with firmness.
    10. Be reasonable.
    11. Be a good example.
    12. Profit by experiences — both adult and child.

A-T6

SYSTEMATIC INTERVENTIONS

Help Children to Restrain Unsocial Impulses

REDIRECT

REMOVE

DISCUSS

WAIT

RETURN

SEPARATE IF NECESSARY

COMMENT ON REGAINED SELF-CONTROL

A-H24

TEACH CHILDREN SOCIALLY ACCEPTABLE WAYS OF GETTING WHAT THEY WANT

1. Watch for the teachable moment.

2. Teach children how to ask for something that another child is using including how to wait until that child is done. Teach them what to do as they wait for their turn.

3. Teach children how to trade one item for another.

4. Teach children how to compromise and negotiate.

5. Teach children how to substitute.

6. Teach children how to play cooperatively through modeling.

7. Teach children how to verbalize alternatives.

8. Show approval when children use these alternative.

9. Help children respond generously.

10. Teach children how to stand up for their own rights.

From: Hendrick. (Citation, p. 119).

TEACH CHILDREN SOCIALLY ACCEPTABLE WAYS OF GETTING WHAT THEY WANT

- Teachable Moment
- Teach Children How to —
    - TRADE
    - COMPROMISE
    - SUBSTITUTE
    - PLAY COOPERATIVELY
    - VERBALIZE ALTERNATIVES
    - STAND UP FOR OWN RIGHTS

From: Hendrick. (Citation, p. 119).

A-H25

HOW TO INCREASE A CHILD'S ABILITY TO MAKE FRIENDS

1. Recognize individual personalities of children.
2. Help children recognize the effect of inappropriate behaviors such as temper tantrums, taking other's possessions or toys, or physical outburst. Talk to them about the issue when they are calm.
3. Pair children for activities or experiences. Change pairings.
4. Look for common interests for matching children.
5. Help children cope with rejection.

From: Hendrick. (Citation, p. 119).

INCREASE THE CHILD'S ABILITY TO FUNCTION SUCCESSFULLY AS PART OF A GROUP

1. Use play situations to help children develop group social skills.
2. Know when to prolong or extend a situation that is positive.
3. Use mealtime or snack time to foster social competence
4. Use group time to foster social competence.

ENCOURAGE THE CHILDREN TO FIND SATISFACTION IN HELPING EACH OTHER AND THE GROUP

1. Children can provide comfort to others.
2. Older children can benefit from helping younger children.
3. Meaningful work offers opportunities for helping.

From: Hendrick, J. (1986). *Total Learning: Curriculum for the young child.* Columbus OH: Merrill.

A-T8

SYSTEMATIC INTERVENTIONS

- INCREASE A CHILD'S ABILITY TO MAKE FRIENDS
- INCREASE A CHILD'S ABILITY TO FUNCTION SUCCESSFULLY AS PART OF A GROUP
- ENCOURAGE CHILDREN TO FIND SATISFACTION IN HELPING EACH OTHER AND THE GROUP

BASIC PRINCIPLES OF EFFECTIVE MANAGEMENT

1. Teachers need a workable management system in order to teach.
2. The goal of management is the cooperation of children in learning activities, not control over children.
3. Children who are engaged in meaningful learning activities are not likely to misbehave.
4. Children are likely to behave if they understand and accept the rules.
    - Decide on a few rules in the children's language
    - Teach the rules
        1. Clearly describe the rules including examples of the desired behavior.
        2. Precisely identify the situations to which the rules apply.
        3. Model the desired behavior and have the children model the behavior.
        4. Provide many opportunities to practice the desired behavior.
        5. Give consistent feedback on how the rules are being followed.
    - Change the rules when indicated.

ONCE THE RULES ARE IN PLACE:

1. Make lessons meaningful and developmentally appropriate.
2. Group children appropriately.
3. Get and keep children's attention when needed.
4. Signal transitions in advance; minimize waiting.
5. Establish routines; supervise all children systematically.
6. Project an image of confidence, firmness, and control with warmth.
7. Ignore minor misbehaviors and model desirable behaviors.
8. Recognize continued minor misbehaviors.
9. Respond to major misbehaviors.
10. Avoid punishment whenever possible.

Schickendanz, J., York, M., Stewart, I. S., & White, D. (1990). *Strategies for teaching young children*. Englewood Cliffs, NJ: Prentice-Hall. pp. 61-80.

A-T9

BASIC PRINCIPLES OF EFFECTIVE MANAGEMENT

1. Teachers need a workable management system in order to teach.
2. The goal of management is the cooperation of children in learning activities, not control over children.
3. Children who are engaged in meaningful learning activities are not likely to misbehave.
4. Children are likely to behave if they understand and accept the rules.
    - Decide on a few rules in the children's language
    - Teach the rules
        1. Clearly describe the rules including examples of the desired behavior.
        2. Precisely identify the situations to which the rules apply.
        3. Model the desired behavior and have the children model the behavior.

4. Provide many opportunities to practice the desired behavior.
5. Give consistent feedback on how the rules are being followed.

- Change the rules when indicated.

Schickendanz, J., York, M., Stewart, I. S., & White, D. (1990). *Strategies for teaching young children.* Englewood Cliffs, NJ: Prentice-Hall, pp. 61-80.

A-H28

COMMUNICATION SKILLS

Children acquire communication skills through hearing and using language, and as adults listen and respond to what children say. Three-year-olds need to have adults speak clearly and frequently. Adults need to respond quickly and appropriately to children's verbal initiatives. Talking may be more important than listening for them. Adults should patiently answer "why" questions. Opportunities should abound to expand children's language. Children should have many opportunities to communicate among themselves.

When focusing on managing behavior, the adult must informally evaluate a child's level of receptive and expressive language. Frequently a child needs concrete examples or pictures to gain self-control. Children with delays in communication skills must be provided with alternatives to verbal instruction. They must be helped to communicate their needs and feelings. Negative behaviors can occur as the result of children's inability to communicate with other children and adults.

A-W8

DEVELOPMENTALLY APPROPRIATE? EXCEPTIONALITY APPROPRIATE?

SOCIAL COMPETENCE:

Why is this developmentally appropriate for children aged 3 through 5?

How would it need to be changed for a child with the following disability?

Deaf:

Severe orthopedic disability:

Visual disability:

Moderate to severe cognitive delays:

Receptive language delays:

Answer the same questions for the remaining preventative approaches:

Enhanced self-esteem:

Systematic intervention:

Communication skills:

LEVEL: ADMINISTRATOR

GOAL: #3 Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: SKILL *(continued)*

OBJECTIVE: Participants will develop the skills needed to provide administrative support to preschool staff as they implement preventative approaches to managing behavior.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Large group activity Participants will describe, using brainstorming techniques, the supportive skills needed to assist families and staff in understanding and using positive/preventative approaches at school or home in developing children's ability to control themselves appropriately.	2. Refer to definitions of preventative approach and each type from previous activity. Worksheet/Transparency (A-W9) *Supportive Skills Needed to Assist Others in Understanding and Using Approaches*	2. Use a chalkboard or Transparency to list the brainstorming ideas. Discuss these as a group. Consider how diversity (e.g., ability, cultural, racial, religious, gender, etc.) among parents and staff may influence communications and support.

SUPPORTIVE SKILLS NEEDED TO ASSIST OTHERS IN UNDERSTANDING APPROACHES

LEVEL: ADMINISTRATOR

GOAL: **#3** Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: SKILL *(continued)*

OBJECTIVE: Participants will develop the skills needed to provide administrative support to preschool staff as they implement preventative approaches to managing behavior.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
3. Large group activity Participants will list ways these supportive skills may need to be different from those used by those who work with older children.	3. Use the ideas from activity #1 Worksheet/Transparency (A-W10) *Differences from Older Children*	3. From the brainstorming list, separate those skills that are unique to preschool children. Make a group list on a chalkboard or Transparency. Encourage participants to add any to their own list. The leader may want to prepare a sample list knowing the group population. The list will depend somewhat on the type of experience or program that the participants come from.

DIFFERENCES FROM SUPPORTING THOSE WHO WORK WITH OLDER CHILDREN

LEVEL: ADMINISTRATOR

GOAL: #3 Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: SKILL *(continued)*

OBJECTIVE: Participants will develop the skills needed to provide administrative support to preschool staff as they implement preventative approaches to managing behavior.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
4. Large group activity Participants will use appropriate language in describing to a parent or parent group the school expectations behaviorally for a child with a disability.	4. Handout (A-H29) *Language Guide on Disability* Worksheet/Transparency for each participant to outline important points in describing behavioral expectations (A-W11)	4. It is important that these expectations are based on what *all* children can do with less emphasis on exceptionality limitations. Reprints of the Handout are available from the Ohio Rehabilitation Services Commission and the Ohio Governor's Council on People with Disabilities, Attn: Publications Dept. — CC5, 400 E. Campus View Boulevard, Columbus, OH 43235-4604.

LANGUAGE GUIDE ON DISABILITY

A PRIMER ON HOW TO SAY WHAT YOU MEAN TO SAY

Introduction

Language is powerful! It reflects, reinforces, and shapes our perceptions of people. Words which reflect positive attitudes and awareness help develop positive communications.

Words about disability have been strongly affected by legal, medical, and political terms. Consequently, our daily language is filled with technical terms which often do not convey our intended social message and which are further complicated by personal styles and preference.

The suggestions in this brochure are provided as a guide to improve language usage. Most suggestions are just common sense, but others are a matter of becoming aware of appropriate, *current* terminology. Using the right words can make a dramatic difference in both our private and public communications!

Examples of Good and Bad Usage

Language should accurately portray an individual or situation. It should emphasize the **person rather than the disability.**

Don't Say ...

"Mr. Lee is a *crippled teacher* and *confined to a wheelchair.* All of his students are *normal.*"

But Instead, Say ...

"Mr. Lee is a *teacher with a disability.* He is a *wheelchair user.* All of his students are *nondisabled.*"

Don't Say ...

"A large bank in Southern California modified its building for its *handicapped employees and customers.* Subsequently, the bank initiated an on-the-job managerial training program which included *afflicted college seniors.* Participants include those *stricken with various conditions.*"

But Instead, Say ..

"A large bank in Southern California modified its building for its *employees and customers with disabilities.* Subsequently, the bank initiated an on-the-job managerial training program which included *college seniors with disabilities.* Participants included *individuals who had either cerebral palsy, a mental/emotional disability or a hearing impairment.*

Preferred Terms and Expressions

These words and expressions are currently preferred and reflect a positive attitude. Some language is "trendy" and meanings may vary depending on context or locale.

- blind
- deaf
- developmentally disabled
- differently able
- disabled
- hearing impaired
- mentally/emotionally disabled
- mentally restored
- mentally retarded
- mobility impaired
- multi-handicapped
- nondisabled
- paralyzed, paralysis
- persons with cerebral palsy
- persons with disabilities
- persons with paraplegia
- seizure
- visually impaired
- wheelchair-user

Again, the ideal is to incorporate these words into our language in a way that expresses the dignity of the person.

Outdated/Inaccurate Terms and Expressions

We are often not aware of the biases or negative attitudes expressed in our language. Elmininating the "bad" words is as important as using the "good" words.

These words and expressions have strong negative, derogatory connotations. Avoid using them and discourage their use by others:

- afflicted
- cerebral-palsied
- confined to a wheelchair
- crazy, insane
- cripple, crip
- deaf and dumb
- deaf mute
- defective
- deformed
- gimp
- invalid
- lame
- maimed
- paralytic, arthritic, epileptic
- poor unfortunate
- retard
- spastic, spaz
- stricken
- victim
- wheelchair-bound
- withered

What Can We Do About Language?

We can educate.

We can inform.

We can politely correct inaccurate use of language.

We can seek positive use of the communications media.

and

We can encourage a societal attitude where only positive, accurate words are acceptable in the context of any conversation!

Reprinted and distributed by:
Governor's Council on People with Disabilities
400 E. Campus View Blvd., Columbus, Ohio 43235-4604
Toll-free in Ohio 1-800-282-4536, ext. 1391 (voice/TDD)
In Columbus, call 438-1391 (voice/TDD)

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Catalog No. G-30, May 1990.

BEHAVIORAL EXPECTATIONS

Outline of points to be included:

LEVEL: ADMINISTRATOR

GOAL: #3 Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: VALUE/ATTITUDE

OBJECTIVE: Participants will appreciate the ethical basis for developmentally appropriate considerations for child-focused management.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Participants will be provided with statements about ethics of various techniques used in behavior management and will relate why this consideration is critical when working with children, staff, and families.	1. Worksheet/Transparency (A-W12, A-T10) *Ethical Considerations*	1. Discuss why each technique is critical ethically and ask each participant to make notes for future use.

A-W12

ETHICAL CONSIDERATIONS

Social Competence: In order to increase social competence, children must have the opportunity to make decisions, learn from a bad decision, and try again within the safe environment of adults who are providing safety and support.

Notes:

Enhanced Self-Esteem: If children are to feel adequate and competent during the school years, their teachers must assist them to like themselves and value their accomplishments.

Notes:

Systematic Interventions: Interventions that are systematic, based on best practices for preschool-aged children, and established as a part of the classroom plan must provide children with a method to gain self-control only when the child's behavior is in need of change — not when the child is being expected to do something that is not developmentally appropriate.

Notes:

Communication Skills: All children deserve to understand others and to be understood through the use of the best communication system available to the child. It is extremely important for staff to be certain that a child understands expectations and language when directions, questions, and events are discussed. They must also be able to express their wants, needs, and ideas.

Notes:

A-T10

ETHICAL CONSIDERATIONS

Social Competence: In order to increase social competence, children must have the opportunity to make decisions, learn from a bad decision, and try again within the safe environment of adults who are providing safety and support.

Notes:

Enhanced Self-Esteem: If children are to feel adequate and competent during the school years, their teachers must assist them to like themselves and value their accomplishments.

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Notes:

LEVEL: ADMINISTRATOR

GOAL: #3 Gain competency in the importance of preventative approaches to managing behaviors that will develop self-control in the areas of social competence, self-esteem, systematic interventions, and communication skills in all children.

COMPETENCY TYPE: VALUE/ATTITUDE *(continued)*

OBJECTIVE: Participants will appreciate the ethical basis for developmentally appropriate considerations for child-focused management.

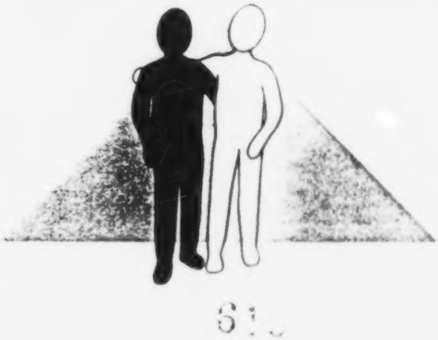
ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Individual or small group activity Participants will write a belief statement related to the ethical use of behavior management techniques.	2. Worksheet (A-W13) *The Ethical Use of Behavioral Management with 3 to 5 Year Olds*	2. An administrator is often called upon to defend the use of particular techniques and more often a decision not to use a particular technique. In these situations it is wise to have already established a rationale for the decision. This need could be used as a lead-in to this activity. Ask for volunteers to read statements. When participants complete this competency, it is hoped that they have gained a knowledge of the preventative management styles that lead toward a child's emerging self-control and can provide the leadership needed to focus a preschool program in this direction.

A-W13

THE ETHICAL USE OF BEHAVIORAL MANAGEMENT WITH 3 TO 5 YEAR OLDS

GOAL 4

Managing Behaviors



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LEVEL: ADMINISTRATOR

GOAL: **#4** Gain competency in knowing when and how to seek additional resources for managing behaviors that are beyond the scope of the school setting for individual child needs.

COMPETENCY TYPE: KNOWLEDGE

OBJECTIVE: A. Participants will describe the resources available through the public school based on the *Rules for the Education of Preschool Children with Disabilities.*

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Participants will review and discuss the related service information in the *Ohio Standards for the Education of Handicapped Children* and the *Rules for the Education of Preschool Children with Disabilities.*	1. Handouts or State Handbooks (provided under Goal 2) (A-H11 and 12) *Rules for the Education of Preschool Children with Disabilities* (CH 3301-31) (1991) *Rules for the Education of Handicapped Children.* (Ohio Department of Education). Columbus, OH. These can be duplicated; however, copies of books should be available.	1. If participants do not have copies of the two rule books, they should be made available to them. Books are available through the SERRC Centers. If a number are needed, it is wise to contact your SERRC early.
2. Large group activity Participants will list and discuss how each related service would be provided within the school setting with which they are most familiar and how each might support children who have more involved behavioral needs (e.g., speech/language therapist may assist a child to develop a communication system and thus reduce the need to use behavioral outburst as a means of communication).	2. Worksheet/Transparency (A-W14) *Related Services*	2. Give participants a few minutes to list. Discuss ways to deliver services. It is important for administrators to recognize those services that may be needed and ways to provide with existing staff, additional staff, or by contract.

A-W14

RELATED SERVICES

How would you provide the following related services in your school? Existing personnel? New staff? Contracted services?

ATTENDANT SERVICES

AUDIOLOGICAL SERVICES

INTERPRETER SERVICES

OCCUPATIONAL THERAPY SERVICES

ORIENTATION AND MOBILITY SERVICES

PHYSICAL THERAPY SERVICES

SCHOOL PSYCHOLOGICAL SERVICES

SPEECH AND LANGUAGE SERVICES

LEVEL: ADMINISTRATOR

GOAL: **#4** Gain competency in knowing when and how to seek additional resources for managing behaviors that are beyond the scope of the school setting for individual child needs.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: B. Participants will recognize potential sources of assistance for preschoolers.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Participants will describe when community resources should be utilized.	1. Transparency (A-T11) *Situations When Resources Have Been Used*	1. List situations when community resources have been needed. Discuss and elicit input from others as to creative solutions or successes with referrals.
2. Large group activity Participants will list agencies that offer free resources.	2. Transparency/Notesheet (A-T12) *Free Resources*	2. Contact local United Way or collaborative groups to request a listing of area services. Develop a list of free resources. SERRC's have information also. Have a list compiled ahead of time that relates to your geographic area. Give participants prepared list.

A-T11

SITUATIONS WHEN RESOURCES HAVE BEEN USED

625

A-T12

FREE RESOURCES

Agency	Target Population	Purpose

LEVEL: ADMINISTRATOR

GOAL: #4 Gain competency in knowing when and how to seek additional resources for managing behaviors that are beyond the scope of the school setting for individual child needs.

COMPETENCY TYPE: KNOWLEDGE *(continued)*

OBJECTIVE: B. Participants will recognize potential sources of assistance for preschoolers who have more involved behavioral needs.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
3. Large group activity Participants will list agencies that offer children with more difficult behavior needs sliding scale services.	3. Transparency/Notesheet (A-T13) *Sliding Scale Resources*	3. Use same resources to develop a list of sliding scale agencies. These lists are intended to become a working resource guide that addresses the needs of a district's students and families. Prepare list with those agencies that relate to your geographic area.

SLIDING SCALE RESOURCES

Agency	Target Population	Purpose

LEVEL: ADMINISTRATOR

GOAL: #4 Gain competency in knowing when and how to seek additional resources for managing behaviors that are beyond the scope of the school setting for individual child needs.

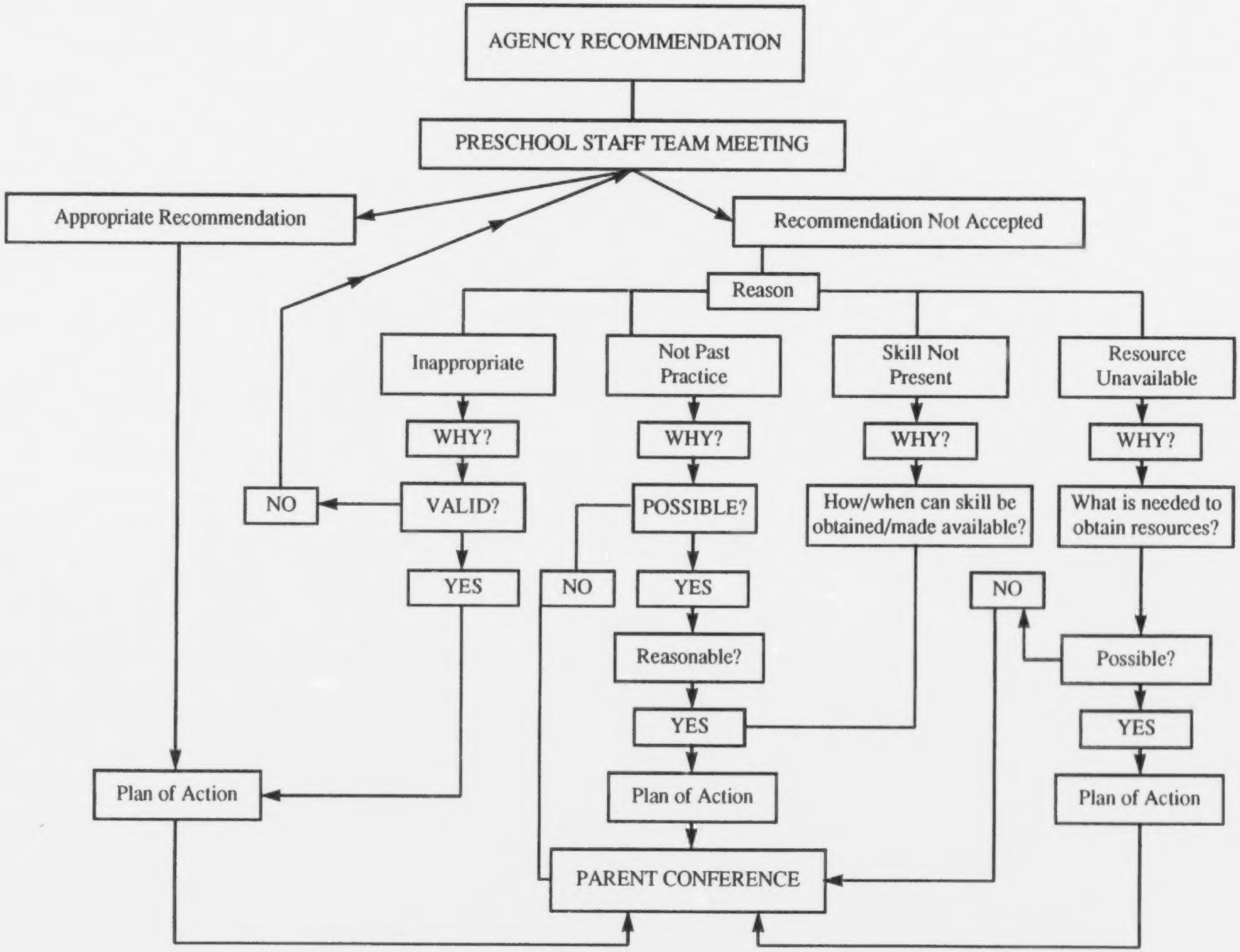
COMPETENCY TYPE: SKILL

OBJECTIVE: Participants will be able to provide information to staff and families about community resources.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Participants will answer questions pertaining to the facilitation of team work which may include outside agencies. Answers should be discussed.	1. Worksheet/Transparency (A-W15) *Evaluation*	1. After participants have had an opportunity to answer questions, the group should discuss these components to establishing a working team in the preschool program — a team that may include outside agencies in a collaborative manner.
2. Participants will show how to help staff members evaluate the behavior management recommendations of outside agencies in terms of school implementation.	2. Handout/Transparency (A-H30) *Flow Chart*	2. Using flow chart, leader may walk participants through a process that helps to evaluate recommendations for implementation or as inappropriate. Parent conferencing is a necessary part of any decision based on a team process to problem solving.

EVALUATION

- Does your early childhood staff have an opportunity to meet to discuss a specific child's needs, referrals to outside agencies, and/or recommendations?
- Who on the preschool staff are expected to provide referrals to parents?
- How can you, as an administrator, facilitate the collection of varied materials?
- Can your staff be released during working hours to attend conferences with out-of-school agencies?
- What kind of coverage is provided?
- Do you provide opportunities for your preschool staff to attend workshops or conferences provided by outside agencies.
- Do you have a resource library for your staff?
- How much time does your preschool staff spend meeting informally with parents to discuss individual children?
- Are support groups available to parents?
- Does your preschool staff know how to make referrals to social agencies for families who live in poverty or face other problems?
- Does your preschool staff know how to work as a team? Do they need to be trained?


AGENCY RECOMMENDATION
PRESCHOOL STAFF TEAM MEETING
Appropriate Recommendation
Recommendation Not Accepted
Reason
Inappropriate
Not Past Practice
Skill Not Present
Resource Unavailable
WHY?
WHY?
WHY?
WHY?
NO
VALID?
POSSIBLE?
How/when can skill be obtained/made available?
What is needed to obtain resources?
YES
NO
YES
NO
Reasonable?
Possible?
YES
YES
Plan of Action
Plan of Action
Plan of Action
PARENT CONFERENCE

LEVEL: ADMINISTRATOR

GOAL: #4 Gain competency in knowing when and how to seek additional resources for managing behaviors that are beyond the scope of the school setting for individual child needs.

COMPETENCY TYPE: VALUE/ATTITUDE

OBJECTIVE: Participants will respect the expectations and limitations of resources available to the staff in the school and in the community.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Participants will value the need for all resource agencies to work together if there is to be success.	1. Worksheets (A-W16 and 17) *Cooperation* *Philosophy*	1. Have participants list a few ideas and share information. Encourage participants to add to their ideas from group discussion. Participants should be able to either write or orally give a one sentence statement reflecting the importance of team work between school, family, and agencies. Reflect on how such a philosophy must reflect sensitivity to diversity (e.g., ability, cultural, racial, religious, gender, etc.).

COOPERATION

Values of working together.

1.

2.

3.

4.

Results of lack of cooperation.

1.

2.

3.

4.

PHILOSOPHY

Write a statement that clarifies a philosophy of team work with preschool, family, and community agencies based on mutual respect.

LEVEL: ADMINISTRATOR

GOAL: **#4** Gain competency in knowing when and how to seek additional resources for managing behaviors that are beyond the scope of the school setting for individual child needs.

COMPETENCY TYPE: VALUE/ATTITUDE *(continued)*

OBJECTIVE: Participants will respect the expectations and limitations of resources available to the staff in the school and in the community.

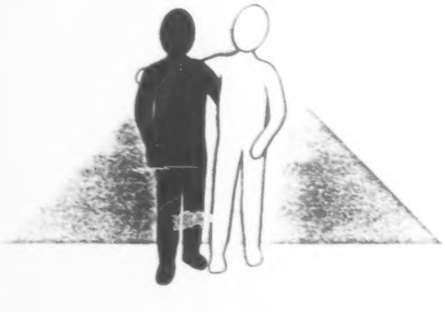
ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
2. Large group activity Participants will show an understanding of and respect for the need to accept and work with some situations (using available resources) rather than promoting a continued search for additional resources.	2. Transparency (A-T14) *Reality*	2. Participants will respond to *Reality* Transparency through discussion. An awareness of the need to implement a preventative approach to managing behavior instead of continuing to seek answers is critical to working successfully with families. While the continued search for improved service to children is a goal, it must not become a crutch or inhibitor to serving children's needs.

REALITY

WHEN IS IT TIME TO QUIT SEEKING ADDITIONAL ANSWERS?

WHEN IS IT TIME TO ACCEPT AVAILABLE INFORMATION, DETERMINE A PLAN, AND INITIATE A TEAM APPROACH TO PROBLEM SOLVING?

Managing Behaviors



GOAL 5

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LEVEL: ADMINISTRATOR

GOAL: #5 Develop an understanding of a philosophy which provides for the development of self-control that can be used to conceptualize a developmentally appropriate environment and behavior plan for either center-based or itinerant-based preschool learning for all children, those who are typically developing and those with disabilities..

COMPETENCY TYPE: KNOWLEDGE

OBJECTIVE: Participants will describe the basis for decisions in implementing an appropriate preschool program that supports the development of self-control in young children.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large or small group activity Participants will list decisions that must be made to initiate or change a preschool program.	1. Worksheet/Transparency (A-W18, A-T15) *Decisions* Worksheet will provide an outline of major categories of decision making.	1. Determine best way to tap participant's ideas. Remind participants how this relates to managing behavior.
2. Participants will know where to find supportive information to defend team decisions concerning the management philosophy of the preschool.	2. Previous materials in goals 1-4.	2. An open discussion will be lead by the leader to gather information/resources not previously presented in this module. It is important to add information from the group with their varied backgrounds.

A-W18

DECISIONS

INSTRUCTIONS: Based on the information from previous sections, list the decisions that must be made to initiate or change a preschool program in the following:

BUILDING:

SPACE:

MATERIALS:

ADULTS:

OTHER:

DECISIONS

BUILDING:

SPACE:

MATERIALS:

ADULTS:

OTHER:

LEVEL: ADMINISTRATOR

GOAL: #5 Develop an understanding of a philosophy which provides for the development of self-control that can be used to conceptualize a developmentally appropriate environment and behavior plan for either center-based or itinerant-based preschool learning for all children, those who are typically developing and those with disabilities..

COMPETENCY TYPE: SKILL

OBJECTIVE: Participants will demonstrate knowledge of the various aspects of an appropriate preschool program that is environmentally and behaviorally sound.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Small group or individual activity Participants will develop a checklist of necessary and desired decisions that should be made to initiate or continue a preschool program that is appropriate for a typically developing or a child with a disability and that will support the development of self-control.	1. Worksheet from previous activity as a guide.	1. Give participants an opportunity to build their own checklist items. Blank Transparencies can be used here.
2. Participants will share checklists to increase completeness.		2. After individuals or small groups have had time to develop a checklist, a group checklist can be developed on the Transparency with encouragement that each participant evaluate their own.
3. Participants will determine supportive resources to assist staff in operation of the preschool program based on best practices in early intervention.	3. Worksheet from previous activity.	

LEVEL: ADMINISTRATOR

GOAL: #5 Develop an understanding of a philosophy which provides for the development of self-control that can be used to conceptualize a developmentally appropriate environment and behavior plan for either center-based or itinerant-based preschool learning for all children, those who are typically developing and those with disabilities.

COMPETENCY TYPE: VALUE/ATTITUDE

OBJECTIVE: Participants will appreciate the variety of needs that an appropriate program must address and will accept the responsibility of supporting staff and parents as they work together to build a successful direction for each child that supports the development of self-control.

ENABLING ACTIVITIES	RESOURCES/MEDIA/READINGS	LEADER NOTES
1. Large group activity Participants will defend the right of a child to participate in a school setting that is the least restrictive environment for that particular child.	1. Worksheet (A-W19) *Least Restrictive Environment* Transparency (A-T16) *Exemplary Programs Define Mainstreaming to Mean Regular Class Placement for All Children*	1. Use the Transparency to stimulate discussion on this topic. Discuss how integration can support the development of self-control and positive behaviors in preschoolers with disabilities.
2. Small group activity Participants will accept the individual needs of the child by listing modifications that could be made within the setting to provide the child with a successful educational opportunity.	2. Worksheet (A-W20) *Modifications*	2. Small groups — each group should develop a listing of possible modification. Time should be allotted to share between groups.

A-W19

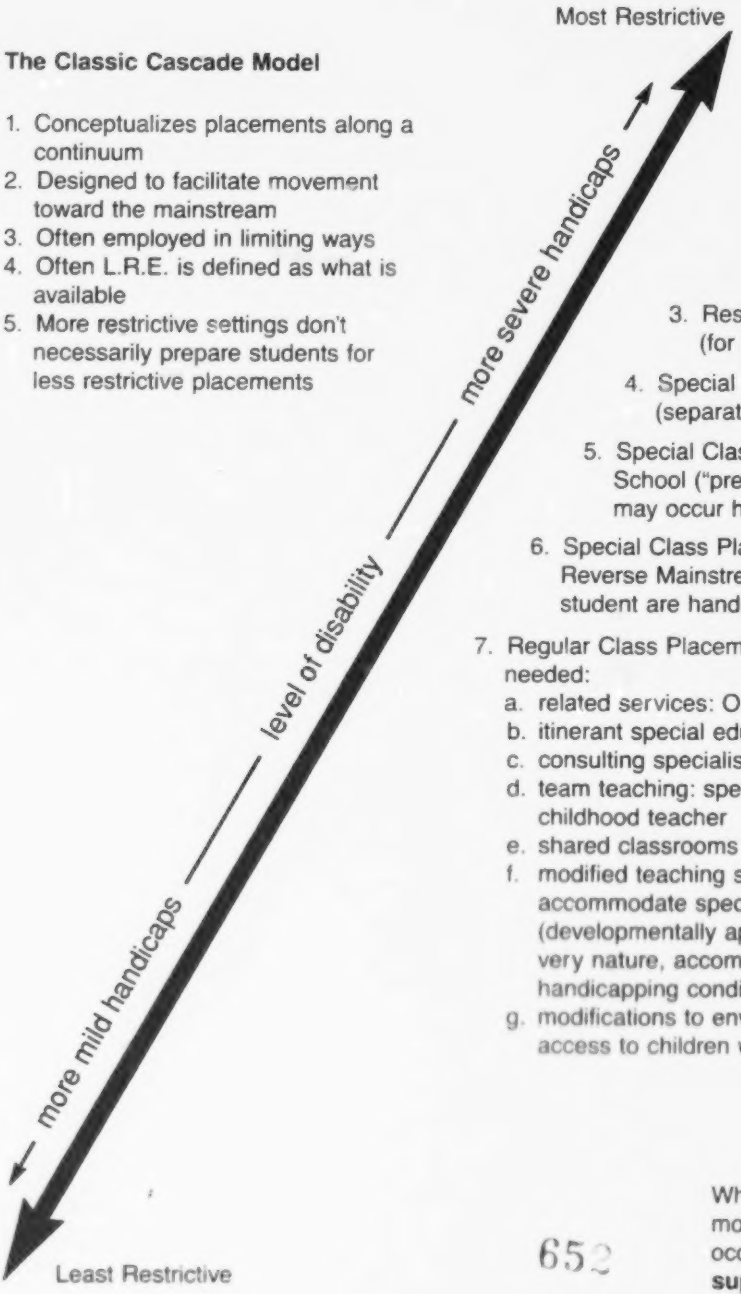
LEAST RESTRICTIVE ENVIRONMENT (MAINSTREAMING)

INSTRUCTIONS: After reviewing the overhead, discuss the rights of children to participate in an educational program that is least restrictive. List your thoughts below.

EXEMPLARY PROGRAMS DEFINE MAINSTREAMING TO MEAN REGULAR CLASS PLACEMENT FOR ALL CHILDREN

The Classic Cascade Model

1. Conceptualizes placements along a continuum
2. Designed to facilitate movement toward the mainstream
3. Often employed in limiting ways
4. Often L.R.E. is defined as what is available
5. More restrictive settings don't necessarily prepare students for less restrictive placements



1. Institutional or Hospital Placement
2. Homebound/ Homebased Instruction (may be the L.R.E. for infants and toddlers)
3. Residential School (for handicapped only)
4. Special Day School (separate facilities)
5. Special Class Located in Regular School ("pretend" mainstreaming may occur here)
6. Special Class Placement With Reverse Mainstreaming (majority of student are handicapped)
7. Regular Class Placement With Support Services as needed:
   a. related services: O.T., P.T., Speech, etc.
   b. itinerant special education teacher
   c. consulting specialist
   d. team teaching: special education teacher with early childhood teacher
   e. shared classrooms
   f. modified teaching strategies designed to accommodate specific handicapping conditions (developmentally appropriate) practices by, their very nature, accommodate a wide range of handicapping conditions)
   g. modifications to environment designed to provide access to children with handicapping conditions

When such supportive services and modifications are provided what occurs is what we term "**the most supportive environment**"

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MODIFICATIONS

INSTRUCTIONS: Within your small group, list modifications that could be made to provide each child with a successful educational opportunity and that will support the development of self-control in young children. Rely on your own personal experiences as well as information previously presented.

Children Needing Support in the Area of Vision:

Children Needing Support in the Area of Hearing:

Children Needing Support in the Area of Mobility:

Children Needing Support in the Area of Communication:

Children Needing Support in the Area of Coordination:

Children Needing Support in the Area of Learning:

Children Needing Support in the Area of Social and Emotional Development:

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